Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEVADA		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if amende

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Part 1: Identify Yourself					
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
1.	Your full name					
	Write the name that is on	Peter	Pamela			
	your government-issued picture identification (for	First name	First name			
	example, your driver's	Gust	Ann			
	license or passport).	Middle name	Middle name			
	Bring your picture identification to your	Scantalides	Scantalides			
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)			
2.	All other names you have used in the last 8 years					
	Include your married or maiden names and any assumed, trade names and doing business as names.	Peter G. Scantalides	Pamela A. Scantalides			
	Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.					
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2318	xxx-xx-2835			

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Peter Gust Scantalides Debtor 1 Debtor 2 Pamela Ann Scantalides Case number (if known) About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Your Employer **Identification Number** (EIN), if any. EIN EIN If Debtor 2 lives at a different address: Where you live 2825 Lochbroom Way Henderson, NV 89044 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Clark County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, Over the last 180 days before filing this petition, I I have lived in this district longer than in any have lived in this district longer than in any other other district. district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Peter Gust Scantalides Debtor 2 Pamela Ann Scantalides					Case number (if known)		
Par	t 2: Tell the Court About	Your Bank	ruptcy Ca	ase			
7.	The chapter of the Bankruptcy Code you are				each, see <i>Notice Required by</i> age 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for Bande box.	kruptcy
	choosing to file under	■ Chapt	ter 7				
		☐ Chapt	ter 11				
		☐ Chapt	ter 12				
		☐ Chapt	ter 13				
8.	How you will pay the fee	abo ord a p	out how your ler. If your re-printed	ou may pay. Typica attorney is submit I address.	ally, if you are paying the fee you tting your payment on your beh	ck with the clerk's office in your local court for mo ourself, you may pay with cash, cashier's check, alf, your attorney may pay with a credit card or c	or money check with
					Iments. If you choose this opti Official Form 103A).	on, sign and attach the Application for Individual	s to Pay
		but app	is not rec plies to yo	quired to, waive your family size and	ur fee, and may do so only if yo you are unable to pay the fee i	n only if you are filing for Chapter 7. By law, a ju our income is less than 150% of the official pove n installments). If you choose this option, you mu cial Form 103B) and file it with your petition.	rty line that
9.	Have you filed for	■ No.					
	bankruptcy within the last 8 years?	☐ Yes.					
	luot o youro.	□ 1es.	District		When	Case number	
			District	-	When	Case number	
			District		When	Case number	
10.	Are any bankruptcy	■ No					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	■ No.	Go to	line 12.			
	residence.	☐ Yes.	Has yo	our landlord obtain	ed an eviction judgment agains	st you?	
				No. Go to line 12			
				Yes. Fill out <i>Initia</i> this bankruptcy p		Judgment Against You (Form 101A) and file it a	s part of

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	otor 1 Peter Gust Scanta otor 2 Pamela Ann Scan			Case number (if known)	
Par	Report About Any Bu	ısinesses	You Own as a Sole Proprie	etor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.		
		☐ Yes.	Name and location of bu	siness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	ate & ZIP Code	
it to this petition. Check the appropriate box to describe your business:					
			☐ Health Care Bus	iness (as defined in 11 U.S.C. § 101(27A))	
			☐ Single Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))	
			☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))	
			☐ Commodity Brok	er (as defined in 11 U.S.C. § 101(6))	
			☐ None of the above	ve	
13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S. C. § 1182(1)? For a definition of small business debtor or a debtor seed 11 business debtor or a debtor as definition of small business debtor or a debtor as definition of small business debtor according to the definition in to the small business debtor according to the definition in the small business debtor according to the definition in the small business debtor according to the definition in the small business debtor according to the definition in the small business debtor according to the definition in the small business debtor according to the definition in the small business debtor according to the definition in the small business debtor according to the definition in the small business debtor according to the definition in the small business debtor or a deb				it can set appropriate deadlines. If you indicate that you are a small business debtor or ubchapter V, you must attach your most recent balance sheet, statement of operations, ome tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C.	
	business debtor, see 11 U.S.C. § 101(51D).	_	Code.	Ad Language Herrican debugger and the deficition in the Rendered Code and	
		☐ Yes.		r 11, I am a small business debtor according to the definition in the Bankruptcy Code, and ed under Subchapter V of Chapter 11.	
		☐ Yes.		r 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I r Subchapter V of Chapter 11.	
Par	t 4: Report if You Own or	Have Any	Hazardous Property or A	ny Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat	☐ Yes.			
	of imminent and identifiable hazard to public health or safety?		What is the hazard?		
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?		
				Number, Street, City, State & Zip Code	

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	tor 1 Peter Gust Scanta tor 2 Pamela Ann Scant					Ca	ase number (if known)
ar	Explain Your Efforts t	o Re	eceive a Briefing About Credit	Counseling			
		Abo	out Debtor 1:		Α	bout	Debtor 2 (Spouse Only in a Joint Case):
15.	Tell the court whether you have received a briefing about credit counseling.	You	I must check one: I received a briefing from an counseling agency within the filed this bankruptcy petition certificate of completion.	ne 180 days before I	Y	■ Ire	ist check one: eceived a briefing from an approved credit eunseling agency within the 180 days before I filed is bankruptcy petition, and I received a certificate o empletion.
	The law requires that you receive a briefing about credit counseling before you file for bankruptcy.		Attach a copy of the certificate plan, if any, that you develope				tach a copy of the certificate and the payment plan, if y, that you developed with the agency.
	You must truthfully check one of the following choices. If you cannot do so, you are not eligible to		I received a briefing from an counseling agency within th filed this bankruptcy petition a certificate of completion.	ne 180 days before I		co th	eceived a briefing from an approved credit unseling agency within the 180 days before I filed is bankruptcy petition, but I do not have a certificate completion.
	file. If you file anyway, the court can dismiss your case, you		Within 14 days after you file th petition, you MUST file a copy payment plan, if any.				thin 14 days after you file this bankruptcy petition, you JST file a copy of the certificate and payment plan, if y.
	will lose whatever filing fee you paid, and your creditors can begin collection activities again.		I certify that I asked for cred services from an approved a unable to obtain those servi days after I made my reques circumstances merit a 30-da	agency, but was ces during the 7 st, and exigent		fro the re	ertify that I asked for credit counseling services on an approved agency, but was unable to obtain ose services during the 7 days after I made my quest, and exigent circumstances merit a 30-day mporary waiver of the requirement.
			of the requirement. To ask for a 30-day temporary requirement, attach a separate what efforts you made to obtain you were unable to obtain it be bankruptcy, and what exigent	e sheet explaining in the briefing, why efore you filed for		att to be cir	ask for a 30-day temporary waiver of the requirement, ach a separate sheet explaining what efforts you made obtain the briefing, why you were unable to obtain it fore you filed for bankruptcy, and what exigent cumstances required you to file this case.
			required you to file this case. Your case may be dismissed i dissatisfied with your reasons briefing before you filed for balf the court is satisfied with you still receive a briefing within 30 You must file a certificate from agency, along with a copy of the developed, if any. If you do no may be dismissed.	for not receiving a nkruptcy. ur reasons, you must 0 days after you file. n the approved he payment plan you		with file see the see	our case may be dismissed if the court is dissatisfied th your reasons for not receiving a briefing before you ad for bankruptcy. The court is satisfied with your reasons, you must still be a briefing within 30 days after you file. You must a certificate from the approved agency, along with a py of the payment plan you developed, if any. If you do t do so, your case may be dismissed. The extension of the 30-day deadline is granted only for use and is limited to a maximum of 15 days.
			Any extension of the 30-day donly for cause and is limited to days. I am not required to receive credit counseling because of	a briefing about			m not required to receive a briefing about credit
			Incapacity. I have a mental illness of that makes me incapable making rational decision	or a mental deficiency le of realizing or			Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
			Disability. My physical disability caunable to participate in a by phone, or through the reasonably tried to do se	a briefing in person, e internet, even after I			Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
			Active duty. I am currently on active military combat zone.	military duty in a			Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debt Debt	tor 1 Peter Gust Scanta tor 2 Pamela Ann Scan				Case number (if kr	nown)			
Part	6: Answer These Quest	ions for R	eporting Purposes						
	What kind of debts do you have?	16a.				n 11 U.S.C. § 101(8) as "incurred by an			
	,		☐ No. Go to line 16b.		'				
			Yes. Go to line 17.						
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you owe the	at are not consumer deb	ts or business del	ots			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	o to line 18.					
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do you are paid that funds will be available			s excluded and administrative expenses			
	administrative expenses are paid that funds will		No						
be available for distribution to unsecured creditors?			☐ Yes	□Yes					
18.	How many Creditors do you estimate that you owe?	□ 1-49		1 ,000-5,000		2 5,001-50,000			
		□ 50-99 ■		☐ 5001-10,000 ☐ 40,004.05.000		50,001-100,000			
		■ 100-1 □ 200-9		☐ 10,001-25,000		☐ More than100,000			
19.	How much do you	□ \$0 - \$50,000		□ \$1,000,001 - \$10 m	illion	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million		□ \$1,000,000,001 - \$10 billion			
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 ☐ \$100,000,001 - \$50		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$	50.000	□ \$1,000,001 - \$10 m	illion	□ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million		□ \$1,000,000,001 - \$10 billion			
	to be:		001 - \$500,000	□ \$50,000,001 - \$100		\$10,000,000,001 - \$50 billion			
		■ \$500,	001 - \$1 million	□ \$100,000,001 - \$50	U million	☐ More than \$50 billion			
Part	7: Sign Below								
For	you	I have ex	ramined this petition, and I declare u	under penalty of perjury t	hat the information	n provided is true and correct.			
			chosen to file under Chapter 7, I am tates Code. I understand the relief a			er Chapter 7, 11,12, or 13 of title 11, eto proceed under Chapter 7.			
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					attorney to help me fill out this			
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.							
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 15 and 3571.							
/s/ Peter Gust Scantalides Peter Gust Scantalides Pamela Ann Scantalides Pamela Ann Scantalides									
			iust Scantalides e of Debtor 1		ture of Debtor 2	iiues			
		Executed	d on April 18, 2024	Execu	ted on April 18	3, 2024			
			MM / DD / YYYY		MM / DD				

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Debtor 1 Peter Gust Scanta Debtor 2 Pamela Ann Scan		Case number (if known)	Case number (if known)				
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Ur for which the person is eligible. I also certify	petition, declare that I have informed the debto ted States Code, and have explained the relief that I have delivered to the debtor(s) the notice	available under each chapter required by 11 U.S.C. § 342(b)				
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) appli schedules filed with the petition is incorrect.	s, certify that I have no knowledge after an inqu	iry that the information in the				
	/s/ Judah Zakalik, Esq.	Date April 18, 2024					
	Signature of Attorney for Debtor	MM / DD / YYYY					
	Judah Zakalik, Esq.						
	Peters & Associates, LLP.						
	Firm name						
	6173 S. Rainbow Blvd.						
	Las Vegas, NV 89118						
	Number, Street, City, State & ZIP Code						
	Contact phone (702) 507-6990	Email address					
	9228 NV						
	Bar number & State						

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7	' :	Liquidation	
\$2	245	filing fee	
\$	78	administrative fee	
<u>+</u> \$	315	trustee surcharge	
\$3	338	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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HII	in this information to identify your case:		
Dei	Peter Gust Scantalides First Name Middle Name Last Name		
Del	otor 2 Pamela Ann Scantalides		
(Spc	use if, filing) First Name Middle Name Last Name		
Uni	ted States Bankruptcy Court for the: DISTRICT OF NEVADA		
Cas	se number		
	se number	_	heck if this is an mended filing
			-
\sim	finial Farms 4000 um		
	ficial Form 106Sum		
	mmary of Your Assets and Liabilities and Certain Statistical Information		12/15
info	es complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend roriginal forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	t 1: Summarize Your Assets		
		Vo	ur assets
			ue of what you own
1.	Schedule A/B: Property (Official Form 106A/B)		
١.	1a. Copy line 55, Total real estate, from Schedule A/B	\$	534,100.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	33,383.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	567,483.00
Par	t 2: Summarize Your Liabilities		
			ur liabilities ount you owe
		,	
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	309,374.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	16,264.00
	3a. Copy the total claims from Fart 1 (phonty unsecured claims) from line de di Schedule L1	Ψ.	·
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	385,025.11
	Your total liabilities	\$	710,663.11
		_	7 10,000111
Par	t 3: Summarize Your Income and Expenses		
ı aı	·		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	9,795.58
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	9,786.40
Par	t 4: Answer These Questions for Administrative and Statistical Records		
^	And you filling for honders that the Chapters 7, 44, and 22		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur othe	r schedules.
	■ Yes		
7.	What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a perso	onal, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this the court with your other schedules.	s box a	nd submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Debtor 1 Debtor 2	Peter Gust Scantalides Pamela Ann Scantalides	Case number (if known)	
	m the <i>Statement of Your Current Monthly Income</i> : Cop A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Li		\$ 5,152.88

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	16,264.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	16,264.00

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	1 F	eter Gust S	Scantalides			
	-	irst Name		Name Last Name		
Debtor Spouse,		Pamela Ann	Scantalides Middle	Name Last Name		
	3/					
United	States Bankru	ptcy Court for	r the: DISTRICT	OF NEVADA		
Case n	umber					☐ Check if this is ar amended filing
√ tt:~	ial Farm	106A/F				
	ial Form edule <i>i</i>		⊇ roperty			12/15
				an asset only once. If an asset fits in more than on	e category, list the asset in	the category where you
_	o. Go to Part 2.	property?				
1 1				What is the property? Check all that each		
	825 Lochbro	om Way		What is the property? Check all that apply Single-family home	Do not deduct accured all	nimo er evernations. Dut
28	325 Lochbro reet address, if avai		scription	What is the property? Check all that apply ■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative	Do not deduct secured cl the amount of any secure Creditors Who Have Clair	ed claims on Schedule D:
			scription	Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any secure Creditors Who Have Clair	d claims on Schedule D: ms Secured by Property.
28 Str			scription 89044-0000	Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any secure Creditors Who Have Clair Current value of the entire property?	current value of the portion you own?
28 Str	enderson	lable, or other des		■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property	the amount of any secure Creditors Who Have Clair Current value of the	current value of the portion you own?
Str	reet address, if avai	lable, or other des	89044-0000	■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land	current value of the entire property? \$534,100.00 Describe the nature of y	Current value of the portion you own? \$534,100.00
Str	reet address, if avai	lable, or other des	89044-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	current value of the entire property? \$534,100.00 Describe the nature of y	Current value of the portion you own? \$534,100.00
28 Str	enderson	lable, or other des	89044-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only	Current value of the entire property? \$534,100.00 Describe the nature of y (such as fee simple, ten	Current value of the portion you own? \$534,100.00
28 Str	reet address, if avai	lable, or other des	89044-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	current value of the entire property? \$534,100.00 Describe the nature of y (such as fee simple, ten a life estate), if known.	Current value of the portion you own? \$534,100.00 your ownership interest lancy by the entireties, or
28 Str	enderson y	lable, or other des	89044-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only	Current value of the entire property? \$534,100.00 Describe the nature of y (such as fee simple, ten	Current value of the portion you own? \$534,100.00 your ownership interest lancy by the entireties, or
28 Str	enderson y	lable, or other des	89044-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$534,100.00 Describe the nature of y (such as fee simple, ten a life estate), if known.	Current value of the portion you own? \$534,100.00 your ownership interest lancy by the entireties, or
28 Str	enderson y	lable, or other des	89044-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$534,100.00 Describe the nature of y (such as fee simple, ten a life estate), if known.	Current value of the portion you own? \$534,100.00 your ownership interest lancy by the entireties, or
28 Str	enderson y	lable, or other des	89044-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$534,100.00 Describe the nature of y (such as fee simple, ten a life estate), if known.	Current value of the portion you own? \$534,100.00 your ownership interest lancy by the entireties, or

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Part 2: Describe Your Vehicles

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Debt Debt		'eter Gust Sca 'amela Ann Sc			Case number (i	f known)	
3. Ca	rs, vans,	trucks, tractors	s, sport utility ve	hicles, motorcycles			
	No						
	Yes						
					Do not di	aduat aggurad a	laima ar ayamatiana Dut
3.1	Make:	Honda		Who has an interest in the property? Check one	the amou	int of any secur	laims or exemptions. Put ed claims on Schedule D:
	Model: Year:	Pilot 2019		☐ Debtor 1 only	Creditors	: Who Have Cla	ims Secured by Property.
		nate mileage:	37,015	Debtor 2 only	Current entire pr	value of the	Current value of the portion you own?
		formation:		■ Debtor 1 and Debtor 2 only□ At least one of the debtors and another	entire pr	operty r	portion you own?
				At least one of the debtors and another			
				■ Check if this is community property (see instructions)		27,043.00	\$27,043.00
5 A (n for all of your entries from Part 2, includit that number here			\$27,043.00
			and Household Ite	ems terest in any of the following items?			Current value of the
Б0 ў	ou ou	or mave any loga	ii or equitable iii	icrost in any or the following items.			portion you own? Do not deduct secured claims or exemptions.
E:	<i>kamples:</i> No			, china, kitchenware			
	Yes. De	escribe					
		Н	lousehold goo	ds and furnishings			\$4,000.0
				<u> </u>			
E:	No	Televisions and I		eo, stereo, and digital equipment; computers, p nedia players, games	orinters, scanners;	music collect	ons; electronic devices
	camples:		urines; paintings, , memorabilia, co	prints, or other artwork; books, pictures, or oth	er art objects; star	np, coin, or ba	seball card collections;
	No	escribe	,				
E	kamples:	for sports and I Sports, photogra musical instrume	phic, exercise, an	d other hobby equipment; bicycles, pool tables	s, golf clubs, skis;	canoes and k	ayaks; carpentry tools;
	No Yes. De	escribe					
	irearms Examples	a: Pistols, rifles. sl	hotguns, ammunit	tion, and related equipment			
	No	escribe		• •			

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Debtor 1 Debtor 2	Peter Gust Scantalides Pamela Ann Scantalides	Case number (if known)	
11. Clothe	s bles: Everyday clothes, furs, leather coats, design	gner wear, shoes, accessories	
□ No	, , ,	,	
Yes.	Describe		
	Clothing and personal e	ffects	\$500.00
12. Jewel ı		ement rings, wedding rings, heirloom jewelry, watches, gems,	gold silver
■ No	oros. Everyday jeweny, costume jeweny, engagi	Emerican ings, wedang inigs, hemoori jeweny, wateries, gems,	goid, silver
☐ Yes.	Describe		
13. Non-fa	rm animals		
<i>Exam</i> □ No	oles: Dogs, cats, birds, horses		
	Describe		
_ 100.			
	2 Dogs		\$40.00
-	her personal and household items you did n	ot already list, including any health aids you did not list	
■ No	Give specific information		
□ res.	Give specific information		
15 Add	the dollar value of all of your entries from Pa	rt 3, including any entries for pages you have attached	
	art 3. Write that number here		\$4,540.00
Part 4: De	scribe Your Financial Assets		
Do you ov	vn or have any legal or equitable interest in a	any of the following?	Current value of the portion you own?
			Do not deduct secured
			claims or exemptions.
16. Cash		as in a safe denseit have and an hand when you file your patit	ion
■ No	ores. Money you have in your wallet, in your hor	ne, in a safe deposit box, and on hand when you file your petit	ION
17 Donos	its of money		
	ples: Checking, savings, or other financial accou	ints; certificates of deposit; shares in credit unions, brokerage	houses, and other similar
□ No	institutions. If you have multiple accounts	with the same institution, list each.	
_		Institution name:	
_ 100.		Citibank	
	17.1. Checking	Account No. Ending 2004	\$1,800.00
	_		-
18. Bonds	, mutual funds, or publicly traded stocks		
Exam	ples: Bond funds, investment accounts with broken	serage firms, money market accounts	
■ No	Institution or issuer n	ame.	
☐ Yes.	Institution or issuer n	ame.	
19. Non-p	ublicly traded stock and interests in incorpor	rated and unincorporated businesses, including an interes	st in an LLC, partnership, and
Joint \ ■ No	renture		
	Give specific information about them		
	Name of entity:	% of ownership:	

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Debtor 1 Debtor 2	Peter Gust So Pamela Ann S		Case number (if known)	
Negot Non-ri ■ No	tiable instruments i negotiable instrume	nclude personal checks, ents are those you canno	egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. t transfer to someone by signing or delivering them.	
⊔ Yes.	Give specific infor	mation about them Issuer name:		
	ment or pension a ples: Interests in IF		x), 403(b), thrift savings accounts, or other pension or profit-sharing pla	ins
■ Yes.	List each account	separately. Type of account:	Institution name:	
		Pension	The Commonwealth of Massachusetts	
			(See Schedule I)	\$0.00
		Pension	Honeywell, Inc.	
			(See Schedule I)	\$0.00
		Pension	MetLife	
			(See Schedule I)	\$0.00
Exam, ■ No □ Yes. 23. Annuit □ No	ples: Agreements v	with landlords, prepaid re	e so that you may continue service or use from a company ent, public utilities (electric, gas, water), telecommunications companies Institution name or individual: noney to you, either for life or for a number of years)	s, or others
■ Yes.		uer name and descriptior		
			Insurance Company	\$0.00
-	<u>(Se</u>	ee Schedule I)		\$0.00
		n IRA , in an account in 29A(b), and 529(b)(1).	a qualified ABLE program, or under a qualified state tuition progr	am.
☐ Yes.	Ins	titution name and descrip	otion. Separately file the records of any interests.11 U.S.C. § 521(c):	
■ No	•		y (other than anything listed in line 1), and rights or powers exerc	sable for your benefit
	·	rmation about them	s, and other intellectual property	
<i>Exam</i> ■ No	ples: Internet doma		ceeds from royalties and licensing agreements	
27. Licens	ses, franchises, a	nd other general intang	gibles cooperative association holdings, liquor licenses, professional licenses	
■ No □ Yes.	Give specific info	rmation about them		
Money or	property owed to	you?		Current value of the

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	Pamela Ann Scantalides		Case number (if known))
				portion you own? Do not deduct secured claims or exemptions.
	efunds owed to you			
□ No ■ Yes	. Give specific information about th	em, including whether you already filed	the returns and the tax years	
		2023 Tax Refund	Income	Unknow
Exam ■ No	y support pples: Past due or lump sum alimor Give specific information	ny, spousal support, child support, maint	enance, divorce settlement, propert	y settlement
Exam	amounts someone owes you oples: Unpaid wages, disability insubenefits; unpaid loans you m	rrance payments, disability benefits, sick lade to someone else	pay, vacation pay, workers' compo	ensation, Social Security
1. Intere	sts in insurance policies sples: Health, disability, or life insur	ance; health savings account (HSA); cre	dit, homeowner's, or renter's insura	ance
■ Yes	Name the insurance company of Company r	each policy and list its value. name:	Beneficiary:	Surrender or refund
■ Yes	Company r	name:	Beneficiary:	Surrender or refund value:
■ Yes		name: nsurance	Beneficiary:	value:
2. Any ir If you some	GE Life II (No Cash	name: nsurance Value)		value: \$0.0
2. Any ir If you some ■ No □ Yes 3. Claim Exam ■ No	GE Life In (No Cash nterest in property that is due yo are the beneficiary of a living trust one has died. Give specific information s against third parties, whether	name: nsurance Value) u from someone who has died	policy, or are currently entitled to re	value: \$0.0
2. Any ir If you some No Yes 3. Claim Exam No Yes 4. Other	GE Life In (No Cash (nsurance Value) u from someone who has died , expect proceeds from a life insurance por not you have filed a lawsuit or made	policy, or are currently entitled to red	\$0.0 ceive property because
2. Any ir If you some No Yes 3. Claim Exam No Yes 4. Other Yes	GE Life In (No Cash (No Cash)) Interest in property that is due you are the beneficiary of a living trust one has died. Give specific information Is against third parties, whether apples: Accidents, employment dispute the contingent and unliquidated class. Describe each claim	nsurance Value) u from someone who has died , expect proceeds from a life insurance por not you have filed a lawsuit or madutes, insurance claims, or rights to sue ims of every nature, including counter	policy, or are currently entitled to red	\$0.0 \$0.0 \$0.0 \$0.0
2. Any ir If you some No Yes 3. Claim Exam No Yes 4. Other No Yes 5. Any fi	GE Life In (No Cash (nsurance Value) u from someone who has died , expect proceeds from a life insurance por not you have filed a lawsuit or madutes, insurance claims, or rights to sue ims of every nature, including counter	policy, or are currently entitled to red	\$0.0 \$0.0 \$0.0 \$0.0
2. Any ir If you some No Yes 3. Claim Exam No Yes 4. Other No Yes 5. Any fi	GE Life In (No Cash (nsurance Value) u from someone who has died , expect proceeds from a life insurance por not you have filed a lawsuit or madutes, insurance claims, or rights to sue ims of every nature, including counter	policy, or are currently entitled to red	\$0.0 \$0.0 \$0.0 \$0.0

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Debt Debt		Peter Gust Scantalides Pamela Ann Scantalides		Case number (if known)	
Part :	5: De	scribe Any Business-Related Property You Own or Have an Inte	erest In. List any real esta	ate in Part 1.	
37. D	o you d	own or have any legal or equitable interest in any business-rela	ted property?		
	No. Go	to Part 6.			
	Yes. G	So to line 38.			
Part (scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	u Own or Have an Intere	st In.	
46. D	o you	own or have any legal or equitable interest in any farm	- or commercial fishir	ng-related property?	
	No.	Go to Part 7.			
I	☐ Yes	. Go to line 47.			
Part 1	7:	Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
	•	have other property of any kind you did not already list	1?		
	⊏xamı No	oles: Season tickets, country club membership			
	_	Give specific information			
54.	Add t	he dollar value of all of your entries from Part 7. Write th	nat number here		\$0.00
Part 8	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$534,100.00
56.	Part 2	2: Total vehicles, line 5	\$27,043.00		
57.	Part 3	3: Total personal and household items, line 15	\$4,540.00		
58.	Part 4	1: Total financial assets, line 36	\$1,800.00		
59.	Part 5	5: Total business-related property, line 45	\$0.00		
60.	Part 6	6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	7: Total other property not listed, line 54	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$33,383.00	Copy personal property total	\$33,383.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$567,483.00

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Fill in this infor	rmation to identify your	case:		
Debtor 1	Peter Gust Scant	alides		
	First Name	Middle Name	Last Name	
Debtor 2	Pamela Ann Scar	ntalides		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	DISTRICT OF NEVADA		
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2825 Lochbroom Way Henderson, NV 89044 Clark County	\$534,100.00		\$250,494.00	Nev. Rev. Stat. §§ 21.090(1)(115.005, 115.010, 115.050
Property was purchased 3/28/2019. Line from <i>Schedule A/B</i> : 1.1			100% of fair market value, up to any applicable statutory limit	,,
2019 Honda Pilot 37,015 miles	\$27,043.00		\$1,275.00	Nev. Rev. Stat. § 21.090(1)(f
Line Horri Schedule A/B. 3.1			100% of fair market value, up to any applicable statutory limit	
Household goods and furnishings Line from Schedule A/B: 6.1	\$4,000.00		\$4,000.00	Nev. Rev. Stat. § 21.090(1)(l
Ellie Holli Gonedale AVE. G. I			100% of fair market value, up to any applicable statutory limit	
Clothing and personal effects Line from Schedule A/B: 11.1	\$500.00		\$500.00	Nev. Rev. Stat. § 21.090(1)(l
Line from Scriedule A/D.			100% of fair market value, up to any applicable statutory limit	
2 Dogs Line from Schedule A/B: 13.1	\$40.00		\$40.00	Nev. Rev. Stat. § 21.090(1)(2
LINE HOITI SCHEUULE AVD. 13.1			100% of fair market value, up to any applicable statutory limit	

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Checking: Citibank Account No. Ending 2004 Line from Schedule A/B: 17.1 Pension: The Commonwealth of Massachusetts See Schedule I) Line from Schedule A/B: 21.1	Current value of the portion you own Copy the value from Schedule A/B \$1,800.00		nount of the exemption you claim tok only one box for each exemption. 75% 100% of fair market value, up to any applicable statutory limit	Specific laws that allow exemption Nev. Rev. Stat. § 21.090(1)(g)
Checking: Citibank Account No. Ending 2004 Line from Schedule A/B: 17.1 Pension: The Commonwealth of Massachusetts See Schedule I) Line from Schedule A/B: 21.1	Copy the value from Schedule A/B \$1,800.00	.	75% 100% of fair market value, up to	
Account No. Ending 2004 Line from Schedule A/B: 17.1 Pension: The Commonwealth of Massachusetts See Schedule I) Line from Schedule A/B: 21.1		_ 	100% of fair market value, up to	
Pension: The Commonwealth of Massachusetts See Schedule I) Line from Schedule A/B: 21.1	\$0.00			
Massachusetts See Schedule I) ine from Schedule A/B: 21.1	\$0.00			
See Schedule I) ine from Schedule A/B: 21.1				Nev. Rev. Stat. § 21.090(1)(r)
ine from Schedule A/B: 21.1		_	100% of fair market value, up to any applicable statutory limit	
Pansion: Hanaywall Inc			any applicable statutory limit	
Pension: Honeywell, Inc.	\$0.00			Nev. Rev. Stat. § 21.090(1)(r)
See Schedule I) ine from Schedule A/B: 21.2			100% of fair market value, up to any applicable statutory limit	
Pension: MetLife	\$0.00			Nev. Rev. Stat. § 21.090(1)(r)
See Schedule I) ine from Schedule A/B: 21.3			100% of fair market value, up to any applicable statutory limit	
American General Life Insurance	\$0.00			Nev. Rev. Stat. § 687B.290
See Schedule I) ine from Schedule A/B: 23.1			100% of fair market value, up to any applicable statutory limit	
ncome: 2023 Tax Refund	Unknown		\$19,960.00	Nev. Rev. Stat. § 21.090(1)(z)
.ine from S <i>chedule A/B</i> : 26.1			100% of fair market value, up to any applicable statutory limit	
GE Life Insurance	\$0.00			Nev. Rev. Stat. § 21.090(1)(k)
ine from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
Earned Income Credit	Unknown		100%	Nev. Rev. Stat. § 21.090(1)(aa)
ine nom <i>Schedule A/B</i> . 33.1			100% of fair market value, up to any applicable statutory limit	
Subject to adjustment on 4/01/25 and every ☑ No	3 years after that for ca	ses fil	,	,
	American General Life Insurance Company See Schedule I) Line from Schedule A/B: 23.1 Income: 2023 Tax Refund Line from Schedule A/B: 28.1 GE Life Insurance No Cash Value) Line from Schedule A/B: 31.1 Earned Income Credit Line from Schedule A/B: 35.1 Are you claiming a homestead exemption Subject to adjustment on 4/01/25 and every No	American General Life Insurance Company See Schedule I) Line from Schedule A/B: 23.1 Income: 2023 Tax Refund Line from Schedule A/B: 28.1 GE Life Insurance No Cash Value) Line from Schedule A/B: 31.1 Earned Income Credit Line from Schedule A/B: 35.1 Unknown Income Credit Line from Schedule A/B: 35.1 Are you claiming a homestead exemption of more than \$189,05 Subject to adjustment on 4/01/25 and every 3 years after that for call No Yes. Did you acquire the property covered by the exemption with the company of the exemption of the company of the exemption with the company of the exemption with the company of the exemption of the company of the exemption of the company of the exemption with the company of the exemption of the com	American General Life Insurance Company See Schedule I) Line from Schedule A/B: 23.1 Income: 2023 Tax Refund Line from Schedule A/B: 28.1 GE Life Insurance No Cash Value) Line from Schedule A/B: 31.1 Earned Income Credit Line from Schedule A/B: 35.1 Line from Schedule A/B: 35.1 Are you claiming a homestead exemption of more than \$189,050? Subject to adjustment on 4/01/25 and every 3 years after that for cases file No Yes. Did you acquire the property covered by the exemption within 1.	any applicable statutory limit American General Life Insurance Company See Schedule I) Interior Schedule A/B: 23.1 Income: 2023 Tax Refund Interior Schedule A/B: 28.1 Income: 2023 Tax Refund Interior Schedule A/B: 31.1 Income: 2023 Tax Refund Interior Schedule A/B: 23.1 Income: 2023 Tax Ref

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Fill in this informa	tion to identify you	r easo:				
FIII III UIIS IIIIOIIIIa	mon to identity you	i case.				
Debtor 1	Peter Gust Scar					
Daluaro	First Name		ast Name			
Debtor 2 (Spouse if, filing)	Pamela Ann Sca		ast Name			
(Opouse II, IIIIIg)	i ii st i vaine	Wilder Name	astivanie			
United States Bank	ruptcy Court for the:	DISTRICT OF NEVADA				
Case number						
(if known)					_	if this is an
					amend	led filing
Official Form	106D					
		Who Have Claims Se	CUITE	d by Propert	V	12/15
ocricadic E	or cultors	Who have claims so	- Cai C	a by 1 Topert	<u>y</u>	12/13
		f two married people are filing together, but, number the entries, and attach it to the				
,	ave claims secured by	your property?				
☐ No. Check the	nis box and submit th	nis form to the court with your other sch	nedules. Y	ou have nothing else t	o report on this form.	
_	II of the information I	•		3	·	
	Secured Claims	Sciow.				
•				Column A	Column B	Column C
		nore than one secured claim, list the credito a particular claim, list the other creditors in		Amount of claim	Value of collateral	Unsecured
much as possible, list	the claims in alphabetic	cal order according to the creditor's name.		Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 American H	londa Finance	Describe the property that secures the	claim:	\$25,768.00	\$27,043.00	\$0.00
Creditor's Name	- India i i i i i i i i i i i i i i i i i i	2019 Honda Pilot 37,015 miles				
Attn: Bankr		As of the date you file, the claim is: Che	ak all that			
Po Box 168		apply.	ck all that			
Irving, TX 7	5016	☐ Contingent				
Number, Street, C	ity, State & Zip Code	Unliquidated				
Who owes the debt	? Check one.	☐ Disputed Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as mor	tgage or see	cured		
Debtor 2 only		car loan)				
■ Debtor 1 and Debt	or 2 only	☐ Statutory lien (such as tax lien, mechan	nic's lien)			
☐ At least one of the	debtors and another	☐ Judgment lien from a lawsuit				
Check if this clair community debt		Other (including a right to offset)	uto Loan			
	Opened 06/22 Last					

Date debt was incurred Active 03/24

7149

Last 4 digits of account number

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Debtor	Total Guot Goulitailus		<u> </u>			Case number (if known	n)		
	First Name	Middle Na	ame	Last Name					
Debtor	2 Pamela A	nn Scantalides	3						
	First Name	Middle Na	ame	Last Name					
2.2 C	aliber Home	l nans In	Describe the pro	perty that secures the	e claim:	\$283,606.00	,	\$534,100.00	\$0.00
	editor's Name	Loans, in		oom Way Hender		Ψ203,000.00		4554,100.00	ψ0.00
			NV 89044 CI		5011,				
				s purchased 3/28/	2019				
_	O D 0000	F.0		ou file, the claim is: Ch					
	O. Box 6808		apply.	,					
	allas, TX 75265		Contingent						
Nu	mber, Street, City, S	State & Zip Code	☐ Unliquidated						
			□ Disputed						
Who ow	ves the debt? C	check one.	Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan)						
☐ Debte	•								
■ Debt	or 1 and Debtor 2	? only	☐ Statutory lien (such as tax lien, mechanic's lien)						
☐ At lea	ast one of the deb	otors and another	☐ Judgment lien	from a lawsuit					
	Check if this claim relates to a community debt		Other (including	ng a right to offset) F	irst Mort	gage			
Date del	ot was incurred	Opened 06/20 Last Active 02/24	Last 4 dig	its of account numbe	r <u>3869</u>				
Add th	e dollar value o	f your entries in C	olumn A on this p	age. Write that numbe	r here:	\$309,	374.00		
	is the last page		the dollar value to	tals from all pages.		\$309,	374.00		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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								1		
		nation to identify your c								
De	btor 1	Peter Gust Scanta		Name	Last Nam					
De	btor 2	Pamela Ann Scant		ramo	Laot Hain					
	ouse if, filing)	First Name		Name	Last Nam	9				
Un	ited States Bar	nkruptcy Court for the:	DISTRICT	OF NEVADA						
C-							<u>.</u>			
	nown)							п сн	neck if this is a	an
								_	nended filing	
∩f	ficial Form	106F/F								
		/F: Creditors W	ho Hav	e Unsecure	d Claim	S			12/1	15
any Sch Sch left. nan	executory conti- edule G: Execut- edule D: Credito Attach the Con- ne and case nun	,	that could re red Leases (red by Prop e. If you hav	esult in a claim. Also Official Form 106G) erty. If more space i e no information to r	o list executo . Do not inclu s needed, co	ry contract: ide any cred py the Part	s on Schedule A/B: I ditors with partially s you need, fill it out,	Property (Officia secured claims t number the entr	I Form 106A/B that are listed i ries in the boxe	s) and on in es on the
		I of Your PRIORITY Uns								
1.	_ `	ors have priority unsecured	l claims aga	inst you?						
	☐ No. Go to Pa	art 2.								
	Yes.									
2.	identify what typ possible, list the Part 1. If more t	priority unsecured claims be of claim it is. If a claim has e claims in alphabetical order than one creditor holds a par ation of each type of claim, se	s both priority r according to ticular claim,	and nonpriority amount the creditor's name. list the other creditors	unts, list that of If you have me s in Part 3.	claim here ar nore than two	nd show both priority a	and nonpriority ar	mounts. As muc	ch as
		anon or each type or claim, se	se trie motrat	alons for this form in t	ne manuchom	DOORIEL.)	Total claim	Priority amount	Nonprio amount	•
2.1		Pr. I. M.		Last 4 digits of acco	ount number	2318	\$16,264.00	\$16,264	ł.00	\$0.00
	Attn: Coperation		/	When was the debt	incurred?	2015 - 2	021	_		
	P.O. Bo	x 7346 Iphia, PA 19101								
		treet City State Zip Code		As of the date you fi	ile, the claim	is: Check a	Il that apply			
	Who incurred	the debt? Check one.		☐ Contingent						
	Debtor 1 o	nly		☐ Unliquidated						
	Debtor 2 o	nly		. ☐ Disputed						
	Debtor 1 a	and Debtor 2 only		Type of PRIORITY u	nsecured cla	ıim:				
	_	e of the debtors and another		☐ Domestic support	obligations					
	_			■ Taxes and certain	other debte	ou owo tho	government.			
		his claim is for a commun	ity debt	☐ Claims for death of	-		•			
	No	subject to offset?		☐ Other. Specify	, porociiai,	u.,	a word intoxicated			
	■ No □ Yes				ncome Ta	xes				
				(Claim am	ount is an	n estimate)			
				'		June 10 un				
Pa	rt 2: List Al	I of Your NONPRIORITY	/ Unsecure	ed Claims						
3.	Do any credito	ors have nonpriority unsecu	ured claims	against you?						
	☐ No. You hav	ve nothing to report in this pa	rt. Submit th	s form to the court wit	th your other	schedules.				
	Yes.									
4.	unsecured clain	nonpriority unsecured cla n, list the creditor separately or holds a particular claim, lis	for each clai	m. For each claim list	ed, identify wh	nat type of cl	aim it is. Do not list cl	aims already incli	uded in Part 1. Î	If more

Total claim

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	Pamela Ann Scantalides Pamela Ann Scantalides		Case number (if known)	
4.1	AES	Last 4 digits of account number	0005	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 2461	When was the debt incurred?	Opened 03/06 Last Active 6/11/20	
	Harrisburg, PA 17105 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	I	
4.2	Aes/keycorp Trust 2000	Last 4 digits of account number	0001	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 2461	When was the debt incurred?	Opened 02/94 Last Active 12/16	
	Harrisburg, PA 17105 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	Check if this claim is for a community			
	debt Is the claim subject to offset?	ration agreement or divorce that you did not		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	<u> </u>	
4.3	American Express	Last 4 digits of account number		\$2,863.06
	Nonpriority Creditor's Name P.O. Box 105278 Atlanta, GA 30348	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another Type of NONPRIORITY unsecured claim:			
	■ Check if this claim is for a community			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	Other. Specify Lawsuit - C	ase No. 23CH003714	

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	Pamela Ann Scantalides 2 Pamela Ann Scantalides		Case number (if kno	own)		
4.4	American Express	Last 4 digits of account number			\$0.00	
	Nonpriority Creditor's Name P.O. Box 105278 Atlanta, GA 30348	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that appl	ly		
	☐ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim·			
	Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	ration agreement or o	divorce that you did not		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other sin	milar debts		
	Yes	■ Other. Specify Lawsuit - C	•			
	☐ Yes	Other. Specify Lawsuit - C	ase No. 23CHU	33101		
4.5	American Express Nonpriority Creditor's Name	Last 4 digits of account number	1009		\$0.00	
	P.O. Box 96001 Los Angeles, CA 90096	When was the debt incurred?				
	Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.					
	☐ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	■ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or o	divorce that you did not		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other sir	milar debts		
	Yes	■ Other. Specify Unsecured				
4.6	American Express Travel Related Services	Last 4 digits of account number	6963		\$4,380.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 981537	When was the debt incurred?	Opened 09/21 9/24/23	Last Active		
	El Paso, TX 79998	_				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that appl	ly		
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	Obligations arising out of a sepa				
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Unsecured				

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	r 1 Peter Gust Scantalides r 2 Pamela Ann Scantalides		Case number (if knov	vn)	
4.7	American Express Travel Related Services	Last 4 digits of account number	3143		\$3,802.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 981537 El Paso, TX 79998	When was the debt incurred?	Opened 10/21 7/26/23	Last Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	,	
	☐ Debtor 1 only ■ Debtor 2 only	☐ Contingent ☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or di	vorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other sim	ilar dahta	
	■ No □ Yes	Other. Specify Unsecured	· ·	nar debts	
4.8	American Express Travel Related Services	Last 4 digits of account number	0553		\$0.00
4.0	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 981537	When was the debt incurred?	Opened 04/18 04/19	Last Active	Ψ0.00
	El Paso, TX 79998	when was the dept incurred?	04/13		
	Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	1	
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or di	vorce that you did not	
	Is the claim subject to offset?	report as priority claims	, and the second	•	
	No	Debts to pension or profit-sharin	g plans, and other sim	ilar debts	
	Yes	Other. Specify Unsecured			
4.9	American Express Travel Related Services	Last 4 digits of account number	9523		\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 981537 El Paso, TX 79998	When was the debt incurred?	Opened 06/18 03/19	Last Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	,	
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or di	vorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other sim	ilar debts	
	□Yes	■ Other. Specify			

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	Peter Gust Scantalides Pamela Ann Scantalides		Case number (if known)	
4.1 0	American Honda Finance	Last 4 digits of account number	3547	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 168088 Irving, TX 75016	When was the debt incurred?	Opened 06/17 Last Active 03/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Automobile	3	
4.1	American Honda Finance	Last 4 digits of account number	3464	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 168088 Irving, TX 75016	When was the debt incurred?	Opened 02/19 Last Active 06/22	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Automobile	9	
4.1	Amex Nonpriority Creditor's Name	Last 4 digits of account number	1283	\$11,543.00
	Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998	When was the debt incurred?	Opened 01/17 Last Active 7/10/23	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	☐ Yes	■ Other. Specify Credit Card	I	

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	Peter Gust Scantalides Pamela Ann Scantalides		Case number (if knowr	n)	
4.1	Amex	Last 4 digits of account number	5333		\$7,602.00
	Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998	When was the debt incurred?	Opened 01/20 L 5/07/23	Last Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	ration agreement or div	rorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other simil	ar debts	
	☐ Yes	■ Other. Specify Credit Card	<u> </u>		
4.1	Amex	Last 4 digits of account number	9833		\$7,594.00
	Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540	When was the debt incurred?	Opened 02/17 L 5/07/23	 Last Active	
	El Paso, TX 79998	-			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	Пол			
	Debtor 2 only	☐ Contingent			
	Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	_	☐ Student loans			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	ration agreement or div	vorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other simil	ar debts	
		Credit Card	l		
	☐ Yes	■ Other. Specify Lawsuit - C	ase No. 24CH000	119	
4.1 5	Amex	Last 4 digits of account number	1233		\$0.00
	Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998	When was the debt incurred?	Opened 10/85 L 08/16	Last Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or div	orce that you did not	
	Is the claim subject to offset?	report as priority claims			
	■ No	☐ Debts to pension or profit-sharin	•	ar debts	
	Yes	■ Other. Specify Credit Card			

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	Peter Gust Scantalides Pamela Ann Scantalides	Case number (if known)			
4.1	Apple Goldman Sachs Bank USA	Last 4 digits of account number 4482	\$7,500.00		
	Nonpriority Creditor's Name	William and a late to a section			
	Lockbox 6112 P.O. Box 7247	When was the debt incurred?			
	Philadelphia, PA 19170				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only				
	■ Debtor 1 and Debtor 2 only	Unliquidated			
		Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Unsecured			
4.1 7	BAC	Last 4 digits of account number 4484	\$0.00		
	Nonpriority Creditor's Name				
	P.O. Box 851001	When was the debt incurred?			
	Dallas, TX 75285 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	7.6 of the date you me, the stant lot officer all that apply			
	☐ Debtor 1 only				
	Debtor 2 only	Contingent			
		☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	■ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Unsecured			
4.1 8	BAC	Last 4 digits of account number 3848	\$0.00		
	Nonpriority Creditor's Name P.O. Box 851001	When was the debt incurred?			
	Dallas, TX 75285 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	76 of the date you me, the claim is. Onesk an that apply			
	☐ Debtor 1 only				
	☐ Debtor 2 only	Contingent			
	_	Unliquidated			
	■ Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims			
		<u></u>			
	No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Unsecured			

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	Peter Gust Scantalides Pamela Ann Scantalides		Case number (if known)			
4.1 9	BAC	Last 4 digits of account number	9241	\$0.00		
9]	Nonpriority Creditor's Name P.O. Box 851001	When was the debt incurred?				
	Dallas, TX 75285 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	☐ Debtor 1 only ☐ Debtor 2 only	Contingent				
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured	I claim:			
	Check if this claim is for a community debt Is the claim subject to offset?	Student loans	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Unsecured				
4.2	Bank of America Nonpriority Creditor's Name	Last 4 digits of account number	4484	\$19,259.00		
	Attn: Bankruptcy 4909 Savarese Circle Tampa, FL 33634	When was the debt incurred?	Opened 05/21 Last Active 07/23			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Credit Card	<u> </u>			
4.2	Bank of America Nonpriority Creditor's Name	Last 4 digits of account number	3848	\$9,328.00		
	Attn: Bankruptcy 4909 Savarese Circle Tampa, FL 33634	When was the debt incurred?	Opened 01/20 Last Active 05/23			
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.					
	☐ Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	_			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt					
	Is the claim subject to offset?	report as priority claims				
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Credit Card	<u> </u>			

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	Peter Gust Scantalides Pamela Ann Scantalides		Case number (if known)	
4.2	Bank of America	Last 4 digits of account number	9241	\$3,826.00
	Nonpriority Creditor's Name Attn: Bankruptcy 4909 Savarese Circle Tampa, FL 33634	When was the debt incurred?	Opened 06/22 Last Active 05/23	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.2	Bank of America Nonpriority Creditor's Name	Last 4 digits of account number	6881	\$0.00
	Attn: Bankruptcy 4909 Savarese Circle Tampa, FL 33634	When was the debt incurred?	Opened 10/04 Last Active 2/05/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.2	Barclays Bank Delaware Nonpriority Creditor's Name	Last 4 digits of account number	2077	\$27,384.00
	Attn: Bankruptcy 125 South West St Wilmington, DE 19801	When was the debt incurred?	Opened 08/19 Last Active 04/23	
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharin		
	Yes	■ Other. Specify Credit Card		

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	Peter Gust Scantalides Pamela Ann Scantalides		Case number (if known)		
4.2 5	Barclays Bank Delaware	Last 4 digits of account number	4178	\$0.00	
	Nonpriority Creditor's Name Attn: Bankruptcy 125 South West St Wilmington, DE 19801	When was the debt incurred?	Opened 01/07 Last Active 7/19/16		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Credit Card			
4.2	Barclays Bank Delaware Nonpriority Creditor's Name	Last 4 digits of account number	0710	\$0.00	
	Attn: Bankruptcy 125 South West St Wilmington, DE 19801	When was the debt incurred?	Opened 01/07 Last Active 10/14		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharin			
	Yes	Other. Specify Credit Card	<u> </u>		
4.2	Barclays Bank Delaware Nonpriority Creditor's Name	Last 4 digits of account number	0675	\$0.00	
	Attn: Bankruptcy 125 South West St Wilmington, DE 19801	When was the debt incurred?	Opened 01/09 Last Active 6/07/16		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	another Type of NONPRIORITY unsecured claim:			
	■ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing			
	Yes	Other. Specify Credit Card	<u> </u>		

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	Peter Gust Scantalides Pamela Ann Scantalides		Case number (if known)		
4.2 8	Capital One	Last 4 digits of account number	6719	\$4,848.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 04/15 Last Active 06/23		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
	□ Yes	Other. Specify Credit Card	01 ,		
4.2	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	7006	\$4,150.00	
	Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 04/15 Last Active 06/23		
	Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
	☐ Yes	Other. Specify Credit Card	<u> </u>		
4.3	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	0800	\$869.00	
	Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 08/04 Last Active 04/23		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another		Type of NONPRIORITY unsecured claim:		
	Check if this claim is for a community	☐ Obligations arising out of a separation agreement or divorce that you did not			
	debt Is the claim subject to offset?				
	No	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts		
		· · ·			
	Yes	Other. Specify Credit Card	<u> </u>		

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	or 1 Peter Gust Scantalides Pamela Ann Scantalides		Case number (if known)	
4.3 1	Capital One	Last 4 digits of account number	2669	\$431.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 01/15 Last Active 04/23	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	01 ,	
	Yes	Other. Specify Credit Card	<u> </u>	
4.3	Cash 1 Nonpriority Creditor's Name	Last 4 digits of account number	1010	\$440.00
	P.O. Box 4115 Concord, CA 94524	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Loan		
4.3	Cash 1 Nonpriority Creditor's Name	Last 4 digits of account number	0497	\$220.00
	P.O. Box 4115 Concord, CA 94524	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sena	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Loan		

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	Pamela Ann Scantalides 2 Pamela Ann Scantalides	Case number (if known)		
4.3	Chase Card Services	Last 4 digits of account number	9688	\$3,879.00
	Nonpriority Creditor's Name Attn: Bankruptcy P.O. 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 12/09 Last Active 04/23	
	Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	is claim is for a community ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not		
	☐ Check if this claim is for a community			
	debt Is the claim subject to offset?			
	■ No			
	☐ Yes ☐ Other. Specify Credit Card			
4.3 5	Chase Card Services	Last 4 digits of account number	7577	\$842.00
	Nonpriority Creditor's Name Attn: Bankruptcy P.O. 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 01/09 Last Active 04/23	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims		
	No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Credit Card		
4.3	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	3726	\$0.00
	Attn: Bankruptcy P.O. 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 01/20 Last Active 10/13/23	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	\square Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Credit Card		

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Debtor Debtor	1 Peter Gust Scantalides 2 Pamela Ann Scantalides		Case number (if known)	
4.3 7	Chase Card Services	Last 4 digits of account number	9247	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy P.O. 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 10/06 Last Active 11/05/15	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent		
	_	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sena	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement of divorce that you did not	
	■ No	Debts to pension or profit-sharin		
	Yes	Other. Specify Credit Card	<u> </u>	
4.3	Citibank	Last 4 digits of account number	8896	\$19,586.00
	Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized Bankruptcy	When was the debt incurred?	Opened 10/17 Last Active 05/23	
	Po Box 790040			
	St Louis, MO 63179 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	•	,	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	<u> </u>	
4.3	Citibank	Last 4 digits of account number	4572	\$15,982.00
	Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040	When was the debt incurred?	Opened 12/16 Last Active 11/26/23	
	St Louis, MO 63179 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	•		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other Specify Credit Card		
		op oo,		

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Pamela Ann Scantalides		Case number (if known)	
Citibank	Last 4 digits of account number	3105	\$15,55
Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040	When was the debt incurred?	Opened 05/18 Last Active 2/15/23	
St Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Citibank	Last 4 digits of account number	2707	\$2,20
Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 St Louis, MO 63179	When was the debt incurred?	Opened 07/21 Last Active 2/28/23	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Credit Card	I	

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for 2 Peter Gust Scantalides Pamela Ann Scantalides		Case number (if known)	
Citibank/Exxon Mobile	Last 4 digits of account number	3134	\$0.0
Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040	When was the debt incurred?	Opened 03/77 Last Active 01/16	
St Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
■ Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	A alaim.	
■ Check if this claim is for a community	Student loans	a Ciaiiii.	
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□ Yes	Other. Specify Credit Card	<u> </u>	
Citibank/Sears	Last 4 digits of account number	3750	\$0.0
Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 St Louis, MO 63179	When was the debt incurred?	Opened 08/08 Last Active 01/13	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify Unsecured		
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Debtor Debtor	Peter Gust Scantalides Pamela Ann Scantalides		Case number (if known)	
4.4	Citibank/The Home Depot	Last 4 digits of account number	5963	\$0.00
	Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040	When was the debt incurred?	Opened 03/07 Last Active 02/16	
	St Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Charge Acc	count	
4.4 5	Citicard Nonpriority Creditor's Name	Last 4 digits of account number	4348	\$0.00
	Citicorp Centralized Bankruptcy Po Box 790040 St Louis, MO 63179	When was the debt incurred?	Opened 8/03/17 Last Active 2/10/20	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	• •	
	Yes	Other. Specify Charge Acc	count	
4.4	Citizens BankMark Sevices Nonpriority Creditor's Name	Last 4 digits of account number	5313	\$0.00
	Attn: Bankruptcy 1 Citizens Plaza Riverside, RI 02915	When was the debt incurred?	Opened 03/18 Last Active 03/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Line	Secured	

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Citizens BankMark Sevices	Last 4 digits of account number	2568	\$0.00
Nonpriority Creditor's Name Attn: Bankruptcy 1 Citizens Plaza	When was the debt incurred?	Opened 10/09 Last Active 03/18	
Riverside, RI 02915 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	,		
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
☐ Yes	Other. Specify Credit Line	Secured	
Citiznsbnk	Last 4 digits of account number	1355	\$0.00
Nonpriority Creditor's Name 1 Citizens Dr Riverside, RI 02915	When was the debt incurred?	Opened 10/09 Last Active 10/14	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	,		
☐ Debtor 1 only	O continuent		
Debtor 2 only	☐ Contingent		
■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	Student loans	u Claini.	
■ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes	■ Other. Specify Unsecured		
Coastl/prosp Nonpriority Creditor's Name	Last 4 digits of account number	7533	\$2,883.00
Attn: Bankruptcy Dept 221 Main Street, Ste 400 San Francisco, CA 94105	When was the debt incurred?	Opened 3/16/22 Last Active 5/01/23	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Debts to pension or profit-sharin	og plans, and other similar debts	
■ No	·		
☐ Yes	■ Other. Specify Credit Card	1	

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	Peter Gust Scantalides Pamela Ann Scantalides		Case number (if known)	
4.5 0	Comenity Bank	Last 4 digits of account number	4031	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 3/28/18 Last Active 3/11/20	
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharin		
	Yes	Other. Specify Credit Card	<u> </u>	
4.5 1	Comenity Bank	Last 4 digits of account number	5098	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125	When was the debt incurred?	Opened 12/16 Last Active 3/19/17	
-	Columbus, OH 43218 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.5	Comenity Bank/Eddie Bauer Nonpriority Creditor's Name	Last 4 digits of account number	2449	\$0.00
	Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 9/03/16 Last Active 7/27/18	
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	-	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Charge Acc	count	

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	1 Peter Gust Scantalides 2 Pamela Ann Scantalides		Case number (if known)	
4.5 3	Comenity Bank/Sportsmans Guide	Last 4 digits of account number	4864	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 8/03/16 Last Active 6/23/20	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
		Student loans	a oldiiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.5	Comenity Bank/Talbots	Last 4 digits of account number	3537	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 1/09/10 Last Active 9/02/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.5 5	Comenity Bank/Talbots	Last 4 digits of account number	3537	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 01/10 Last Active 9/02/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	☐ Debts to pension or profit-sharin	• •	
	Yes	Other. Specify Charge Acc	count	

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	Peter Gust Scantalides Pamela Ann Scantalides		Case number (if known)	
4.5 6	Comenitycapital/bjsclb	Last 4 digits of account number	8782	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 01/07 Last Active 2/19/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
		Student loans	. Julii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other Specify Credit Card		
4.5 7	Costco Citi Card	Last 4 digits of account number	3631	\$12,163.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 6500 Sioux Falls, SD 57117	When was the debt incurred?	Opened 11/17 Last Active 5/12/23	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.5	Crb/sunlight/launch	Last 4 digits of account number	2085	\$5,370.00
	Nonpriority Creditor's Name Sunlight Financial Llc Charlotte, NC 28246	When was the debt incurred?	Opened 11/21 Last Active 03/24	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	5,	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Home Impre	ovement	

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	r 1 Peter Gust Scantalides r 2 Pamela Ann Scantalides		Case number (if known)	
4.5 9	Credit One American Express	Last 4 digits of account number	5339	\$300.00
	Nonpriority Creditor's Name	When was the debt incurred?		
	P.O. Box 60500 City of Industry, CA 91716	when was the dept incurred?		
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Unsecured		
4.6	Credit One American Express	Last 4 digits of account number	9307	Unknown
0	Nonpriority Creditor's Name			
	P.O. Box 6005	When was the debt incurred?		
	City of Industry, CA 91716 Number Street City State Zip Code	As of the date you file, the claim	e. Chock all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	s. Check all that apply	
	☐ Debtor 1 only	Пол		
	Debtor 2 only	☐ Contingent		
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt	_	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Unsecured		
4.6	Credit One Bank	Last 4 digits of account number	9843	\$0.00
	Nonpriority Creditor's Name	_	On and 5/07/40 Lead Asting	
	Attn: Bankruptcy Department 6801 Cimarron Rd	When was the debt incurred?	Opened 5/27/16 Last Active 5/26/19	
	Las Vegas, NV 89113 Number Street City State Zip Code		e. Charle all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim	s: Спеск ан that аррну	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin		
	■ No			
	☐ Yes	■ Other. Specify Credit Card		

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	Peter Gust Scantalides Pamela Ann Scantalides		Case number (if known)	
4.6	Credit One Bank	Last 4 digits of account number	3568	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Department 6801 Cimarron Rd Las Vegas, NV 89113	When was the debt incurred?	Opened 10/17 Last Active 3/24/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
		☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.6	Credit One Bank	Last 4 digits of account number	1088	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Department 6801 Cimarron Rd Las Vegas, NV 89113	When was the debt incurred?	Opened 11/16 Last Active 6/23/19	
•	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	1	
4.6	Credit One Bank	Last 4 digits of account number	9307	Unknown
	Nonpriority Creditor's Name Attn: Bankruptcy Department 6801 Cimarron Rd Las Vegas, NV 89113	When was the debt incurred?	Opened 03/23 Last Active 07/23	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	<u> </u>	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card	<u> </u>	

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	or 1 Peter Gust Scantalides Pamela Ann Scantalides		Case number (if known)	
4.6 5	Credit One Bank	Last 4 digits of account number	6533	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Department 6801 Cimarron Rd Las Vegas, NV 89113	When was the debt incurred?	Opened 08/10 Last Active 06/15	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	l	
4.6 6	Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number	5705	\$0.00
	Attn: Bankruptcy Department 6801 Cimarron Rd Las Vegas, NV 89113	When was the debt incurred?	Opened 09/10 Last Active 11/14	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	l .	
4.6 7	Debt Reduction Services	Last 4 digits of account number	7555	\$0.00
	Nonpriority Creditor's Name 6213 N. Cloverdale Rd., #100 Boise, ID 83713	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	П.		
	Debtor 2 only	☐ Contingent		
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community debt	Student loans	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	nation agreement of divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Unsecured		

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	Peter Gust Scantalides Pamela Ann Scantalides		Case number (if known)	
4.6	Dell Financial Services	Last 4 digits of account number	4072	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy P.O. Box 81577 Austin, TX 78708	When was the debt incurred?	Opened 01/08 Last Active 1/13/15	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.6	Discover Financial	Last 4 digits of account number	7557	\$2,030.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3025 New Albany, OH 43054	When was the debt incurred?	Opened 03/22 Last Active 06/23	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other Specify Credit Card	<u> </u>	
4.7	Discover Financial Nonpriority Creditor's Name	Last 4 digits of account number	7595	\$0.00
	Attn: Bankruptcy Po Box 3025 New Albany, OH 43054	When was the debt incurred?	Opened 12/17 Last Active 7/29/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin		
	Yes	■ Other. Specify Credit Card		

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	r 1 Peter Gust Scantalides r 2 Pamela Ann Scantalides	Case number (if known)		
4.7	Elastic	Last 4 digits of account number	6395	\$1,245.00
	Nonpriority Creditor's Name 4030 Smith Road	When was the debt incurred?		
	Cincinnati, OH 45209 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent		
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	agreement of arrested that you are not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Loan		
4.7	Empower Finance/finwis Nonpriority Creditor's Name	Last 4 digits of account number	7VN6	\$0.00
	9169 W State St #499 Garden City, ID 83714	When was the debt incurred?	Opened 09/23 Last Active 02/24	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Check Cred	lit Or Line Of Credit	
4.7	First National Bank/Legacy	Last 4 digits of account number	8900	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 5097 Sioux Falls, SD 57117	When was the debt incurred?	Opened 3/22/15 Last Active 7/31/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin		
	☐ Yes	Other. Specify Credit Card		

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	or 1 Peter Gust Scantalides Pamela Ann Scantalides		Case number (if known)	
4.7 4	First Premier Bank	Last 4 digits of account number	3950	\$757.00
	Nonpriority Creditor's Name 3820 N Louise Ave Sioux Falls, SD 57107	When was the debt incurred?	Opened 01/23 Last Active 3/02/24	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	agreement of arrenes and you are not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	<u> </u>	
4.7 5	First Premier Bank	Last 4 digits of account number	8792	\$749.00
	Nonpriority Creditor's Name 3820 N Louise Ave Sioux Falls, SD 57107	When was the debt incurred?	Opened 02/23 Last Active 3/10/24	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin		
	Yes	Other. Specify Credit Card	<u> </u>	
4.7 6	First Savings Bank Nonpriority Creditor's Name	Last 4 digits of account number	5082	\$0.00
	Attn: Bankruptcy P.O. Box 5019 Sioux Falls, SD 57117	When was the debt incurred?	Opened 12/24/14 Last Active 8/07/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharin		
	☐ Yes	■ Other. Specify Credit Card	l	

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	or 1 Peter Gust Scantalides Pamela Ann Scantalides		Case number (if know	wn)	
4.7	Fm/granite Edvance	Last 4 digits of account number	4163		\$113,761.00
	Nonpriority Creditor's Name	_		_	
	121 South 13th Street Lincoln, NE 68508	When was the debt incurred?	Opened 04/20 02/24	Last Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	y	
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or d	ivorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other sim	nilar debts	
	Yes	Other. Specify Governmen	nt Unsecured Gu	iarantee Loan	
4.7 8	Fnb Omaha	Last 4 digits of account number	9286	_	\$11,652.00
	Nonpriority Creditor's Name Attn: Bankruptcy P.O. Box 3128	When was the debt incurred?	Opened 05/21 07/23	Last Active	
	Omaha, NE 68103 Number Street City State Zip Code	As of the date you file, the claim i	e. Chack all that apply	,	
	Who incurred the debt? Check one.	As of the date you me, the claim	s. Oneok all that apply	y	
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or d	ivorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other sim	nilar debts	
	Yes	Other. Specify Credit Card	<u> </u>		
4.7 9	Genesis FS Card Services	Last 4 digits of account number	6727	_	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 4477	When was the debt incurred?	Opened 8/03/1 10/11/19	17 Last Active	
	Beaverton, OR 97076 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	y	
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or d	ivorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other sim	nilar debts	
	☐ Yes	■ Other Specify Credit Card	I		
		— Outlot. Opcomy			

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	pr 1 Peter Gust Scantalides Pamela Ann Scantalides		Case number (if known)	
4.8 0	Genesis FS Card Services	Last 4 digits of account number	6174	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 4477 Beaverton, OR 97076	When was the debt incurred?	Opened 7/06/15 Last Active 3/23/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	<u> </u>	
4.8	Goldman Sachs Bank USA	Last 4 digits of account number	6630	\$7,398.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 70379 Philodolphia PA 10176	When was the debt incurred?	Opened 08/19 Last Active 2/29/24	
	Philadelphia, PA 19176 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.8	Granite State Mgmt Res Nonpriority Creditor's Name	Last 4 digits of account number	8249	Unknown
	4 Barrell Ct Concord, NH 03301	When was the debt incurred?	Opened 05/20 Last Active 3/18/22	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured		
	■ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	ıl	

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	r 1 Peter Gust Scantalides r 2 Pamela Ann Scantalides		Case number (if known)	
4.8	Green Funds Go	Last 4 digits of account number	6422	\$752.35
<u> </u>	Nonpriority Creditor's Name			
	P.O. Box 2009	When was the debt incurred?		
	Kahnawake, Quebec JOL 1BO Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	is. Oneck all that apply	
	Debtor 1 only			
	Debtor 2 only	Contingent		
	Debtor 1 and Debtor 2 only	Unliquidated		
		Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	☐ Yes		51,	
	Li Tes	Other. Specify Loan		
4.8	Harvard University Emp	Last 4 digits of account number	3109	\$8,648.00
	Nonpriority Creditor's Name		Opened 04/21 Last Active	
	104 Mount Auburn St Cambridge, MA 02138	When was the debt incurred?	03/23	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharir		
	Yes	Other. Specify Credit Card	<u></u>	
4.8	Lunu Fundina/Decument Conitel		2700	£2.020.00
5	Lvnv Funding/Resurgent Capital Nonpriority Creditor's Name	Last 4 digits of account number	3789	\$2,039.00
	Attn: Bankruptcy		Opened 01/24 Last Active	
	Po Box 10497	When was the debt incurred?	06/23	
	Greenville, SC 29603 Number Street City State Zip Code		: OL . I . II	
	Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only			
	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Unliquidated		
		☐ Disputed Type of NONPRIORITY unsecure		
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	aradon agreement of divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
		Factoring (Company Account Credit One	
	☐ Yes	Other. Specify Bank N.A.		

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	Peter Gust Scantalides Pamela Ann Scantalides		Case number (if known)	
4.8 6	Main Financial	Last 4 digits of account number	5225	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3521 Evansville, IN 47731	When was the debt incurred?	Opened 11/05 Last Active 5/05/16	_
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	Check if this claim is for a community debt	☐ Student loans	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement of divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Check Cred	lit Or Line Of Credit	_
4.8	Marcus by Goldman Sachs	Last 4 digits of account number	7787	\$9,218.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 45400 Salt Lake City, UT 84145	When was the debt incurred?	Opened 05/21 Last Active 04/23	_
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Unsecured		_
4.8	Marcus by Goldman Sachs Nonpriority Creditor's Name	Last 4 digits of account number	0334	\$0.00
	Attn: Bankruptcy Po Box 45400 Salt Lake City, UT 84145	When was the debt incurred?	Opened 2/05/20 Last Active 2/28/23	_
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Unsecured		

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MC - HUECU	Last 4 digits of account number		\$0.0
Nonpriority Creditor's Name			
Box 382609	When was the debt incurred?		
Cambridge, MA 02238 Number Street City State Zip Code	As of the date you file, the claim is	: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is	з спеск ан так арру	
Debtor 1 only	_		
Debtor 2 only	Contingent		
_	Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separa report as priority claims	ation agreement or divorce that you did not	
No	Debts to pension or profit-sharing	plans, and other similar debts	
☐ Yes	Other. Specify Unsecured		
Mr Cooper/United Wholesale			
Mortgage Nonpriority Creditor's Name	Last 4 digits of account number	7939	\$0.0
Attn: Bankruptcy		Opened 03/19 Last Active	
Po Box 619098	When was the debt incurred?	06/20	
Dallas, TX 75261			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	: Check all that apply	
Debtor 1 only	_		
_	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separa report as priority claims	ation agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
□Yes	Other. Specify Real Estate	Mortgage	
Program MC		4522	¢2.406.7
Prosper MC Nonpriority Creditor's Name	Last 4 digits of account number	1533	\$2,196.7
P.O. Box 650078 Dallas, TX 75265	When was the debt incurred?		
Number Street City State Zip Code	As of the date you file, the claim is	: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	Student loans		
Check if this claim is for a community debt	_	ation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	ation agreement or divolce that you did not	
■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
□ Yes	■ Other. Specify Unsecured		

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	or 2 Pamela Ann Scantalides	Case number (if known)	
4.9	Rapid Cash	Last 4 digits of account number	\$0.00
2	Nonpriority Creditor's Name		
	P.O. Box 535	When was the debt incurred?	
	Dublin, OH 43017		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
	Debtor 2 only	☐ Contingent	
	_	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Loan	
4.9 3	Rapid Cash	Last 4 digits of account number 1404	\$0.00
3	Nonpriority Creditor's Name		• • • • • • • • • • • • • • • • • • • •
	P.O. Box 535	When was the debt incurred?	
	Dublin, OH 43017 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	_	
	Debtor 2 only	Contingent	
	<u> </u>	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
		-	
	Yes	■ Other. Specify Loan	
4.9 4	Rapid Cash	Last 4 digits of account number 1405	\$0.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	P.O. Box 535 Dublin, OH 43017	when was the dept incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Loan	
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Debtor 1 Peter Gust Scantalides Debtor 2 Pamela Ann Scantalides Case r		Case number (if known)	
4.9 5	Rapid Cash	Last 4 digits of account number 1404	\$0.00
<u>J</u>	Nonpriority Creditor's Name		·
	P.O. Box 535	When was the debt incurred?	
	Dublin, OH 43017	As of the data was file the plaint in Ol. 1. 11.11	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
	Debtor 2 only	☐ Contingent	
		☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Loan	
4.9	Panid Cash/Spandy Cash	Last 4 digits of account number 7963	\$0.00
6	Rapid Cash/Speedy Cash Nonpriority Creditor's Name	Last 4 digits of account number 7963	\$0.00
	7460 W. Cheyenne, #110 Las Vegas, NV 89129	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	<u> </u>	☐ Student loans	
	Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Loan	
		· · · · · · · · · · · · · · · · · · ·	
4.9 7	Rapid Cash/Speedy Cash	Last 4 digits of account number 0938	\$0.00
	Nonpriority Creditor's Name 7460 W. Cheyenne, #110	When was the debt incurred?	
	Las Vegas, NV 89129		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Loan	

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	Peter Gust Scantalides Pamela Ann Scantalides	Case number (if known)		
4.9	Sofia Tixta Thomas	Last 4 digits of account number 0991	\$0.00	
	Nonpriority Creditor's Name P.O. Box 981075	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	□ Unliquidated		
	■ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Unsecured		
4.9	Spotloan	Last 4 digits of account number 7763	\$0.00	
	Nonpriority Creditor's Name P.O. Box 927 Palatine, IL 60078	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	☐ Debtor 1 only			
	☐ Debtor 2 only	☐ Contingent		
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:		
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Loan		
4.1 00	Spotloan	Last 4 digits of account number 5288	\$0.00	
	Nonpriority Creditor's Name P.O. Box 927 Palatine, IL 60078	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only			
	Debtor 2 only	Contingent		
	Debtor 1 and Debtor 2 only	Unliquidated		
	_	Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	Type of NONPRIORITY unsecured claim: ☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Loan		

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	Peter Gust Scantalides Pamela Ann Scantalides		Case number (if known)	
4.1 01	Syncb/Care Credit	Last 4 digits of account number	7519	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965061	When was the debt incurred?	Opened 03/06 Last Active 06/15	
-	Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	I alaba.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	i ciaim:	
	■ Check if this claim is for a community debt Is the claim subject to offset?	<u> </u>	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
02	Syncb/Lord & Taylor	Last 4 digits of account number	6115	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 08/11 Last Active 11/14	
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin		
	Yes	Other. Specify Charge Acc	count	
03	SYNCB/Texaco Nonpriority Creditor's Name	Last 4 digits of account number	4377	\$0.00
	Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 08/87 Last Active 08/15	
=	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	and an and albert 100 to	
	■ No	Debts to pension or profit-sharin		
	Yes	Other. Specify Credit Card		

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	r 1 Peter Gust Scantalides r 2 Pamela Ann Scantalides		Case number (if known)	
4.1 04	Synchrony Bank	Last 4 digits of account number	9562	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 11/22 Last Active 8/14/23	
	Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	d claim: ration agreement or divorce that you did not	
	■ No □ Yes	□ Debts to pension or profit-sharin ■ Other. Specify Credit Carc		
4.1 05	Synchrony Bank Nonpriority Creditor's Name	Last 4 digits of account number	1404	\$0.00
	P.O. Box 71711 Philadelphia, PA 19176 Number Street City State Zip Code	When was the debt incurred?	Cr Charle all that analy	
	Who incurred the debt? Check one. Debtor 1 only	As of the date you file, the claim i	s: Спеск ан tnat apply	
	Debtor 2 only	☐ Contingent ☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify	g plans, and other similar debts	
4.1 06	Synchrony Bank/Amazon	Last 4 digits of account number	1404	\$7,343.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 11/16 Last Active 04/23	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Student loans	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Charge Acc		
		Guion Opcomy		

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	Peter Gust Scantalides Pamela Ann Scantalides		Case number (if known)	
4.1 07	Synchrony Bank/Care Credit	Last 4 digits of account number	9296	\$8,233.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 03/17 Last Active 04/23	
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.1 08	Synchrony Bank/Lowes	Last 4 digits of account number	2214	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 12/07 Last Active 03/15	
-	Number Street City State Zip Code Who incurred the debt? Check one.	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims ☐ Debts to pension or profit-sharin		
	No	·		
	Yes	Other. Specify Unsecured		
4.1 09	Truist Financial Nonpriority Creditor's Name	Last 4 digits of account number	2416	\$12,870.00
	Attn: Bankruptcy 214 N Tryon St Charlotte, VA 28202	When was the debt incurred?	Opened 07/19 Last Active 06/23	
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharin		
	Yes	Other. Specify Unsecured		

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	Peter Gust Scantalides Pamela Ann Scantalides		Case number (if known)	
4.1 10	Upgrade, Inc.	Last 4 digits of account number	1851	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy 275 Battery Street 23rd Floor San Francisco, CA 94111	When was the debt incurred?	Opened 08/22 Last Active 07/23	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecured ☐ Student loans		
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	ration agreement or divorce that you did not g plans, and other similar debts	
	☐ Yes	■ Other. Specify Check Cred	dit Or Line Of Credit	
4.1 11	Upgrade, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	1590	\$0.00
	P.O. Box 52210 Phoenix, AZ 85072	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify	g plans, and other similar debts	
4.1 12	US Bank/RMS Nonpriority Creditor's Name	Last 4 digits of account number	4110	\$0.00
	Attn: Bankruptcy Po Box 5229 Cincinnati, OH 45201	When was the debt incurred?	Opened 07/06 Last Active 8/02/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	d claim:	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card	I	

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Debtor Debtor	Peter Gust Scantalides Pamela Ann Scantalides		Case number (if known)	
4.1 13	Wakefield Cooperative	Last 4 digits of account number	2160	\$0.00
	Nonpriority Creditor's Name	When was the debt incurred?	Opened 03/09 Last Active 03/19	
	Number Street City State Zip Code	As of the date you file, the claim	e. Chock all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	s. Check all that apply	
	☐ Debtor 1 only	Пол		
	☐ Debtor 2 only	☐ Contingent		
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
	At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	l claim:	
	_	Student loans	a Claiiii.	
	■ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	<u> </u>	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debte	
	■ No	·	• •	
	Yes	Other. Specify Real Estate	Mortgage	
4.1 14	WebBank/ Cleo Nonpriority Creditor's Name	Last 4 digits of account number	4979	\$0.00
	Attn: Bankruptcy 594 Broadway, Suite 701	When was the debt incurred?	Opened 11/23 Last Active 02/24	
	New York, NY 10012 Number Street City State Zip Code	As of the date you file, the claim	s. Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	3. Oncok all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Line	Secured	
4.1	Walls Farms Barris		2572	#4 000 00
15	Wells Fargo Bank Nonpriority Creditor's Name	Last 4 digits of account number	3572	\$1,333.00
	Attn: Bankruptcy 1 Home Campus, 3rd Floor Mac X2303-01a Des Moines, IA 50328	When was the debt incurred?	Opened 06/21 Last Active 03/23	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	■ Other. Specify Credit Card	I	
		— Outer. Specify		

Part 3: List Others to Be Notified About a Debt That You Already Listed

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Debtor 1 Peter Gust Scantalides Pamela Ann Scantalides		Case number (if known)
is trying to collect from you for a debt you owe to	someone else, list the original credito hat you listed in Parts 1 or 2, list the a	nat you already listed in Parts 1 or 2. For example, if a collection agency or in Parts 1 or 2, then list the collection agency here. Similarly, if you additional creditors here. If you do not have additional persons to be
Name and Address Barclays Bank of Delaware	On which entry in Part 1 or Part 2 did Line 4.24 of (Check one):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims
P.O. Box 60517 City of Industry, CA 91716	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Capital One P.O. Box 71087 Charlotte, NC 28272	On which entry in Part 1 or Part 2 did Line 4.28 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Chase PO Box 15123 Wilmington, DE 19850	On which entry in Part 1 or Part 2 did Line 4.34 of (Check one): Last 4 digits of account number	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Credit One Visa PO Box 60500 City of Industry, CA 91716	On which entry in Part 1 or Part 2 did Line 4.64 of (Check one): Last 4 digits of account number	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address First Premier Bank P.O. Box 5524 Sioux Falls, SD 57117	On which entry in Part 1 or Part 2 did Line 4.74 of (Check one): Last 4 digits of account number	you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Firstmark Services P.O. Box 82522 Lincoln, NE 68501	On which entry in Part 1 or Part 2 did Line 4.77 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address McCarthy Burgess & Wolf The MB&W Building 26000 Cannon Road Cleveland, OH 44146	On which entry in Part 1 or Part 2 did Line 4.57 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Sherry A. Moore, Esq. Zwicker & Associates, PC 851 S. Rampart Blvd., Suite 150 Las Vegas, NV 89145	On which entry in Part 1 or Part 2 did Line 4.14 of (Check one):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Sherry A. Moore, Esq. Zwicker & Associates, PC 851 S. Rampart Blvd., Suite 150 Las Vegas, NV 89145	On which entry in Part 1 or Part 2 did Line 4.3 of (Check one):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Sherry A. Moore, Esq. Zwicker & Associates, PC 851 S. Rampart Blvd., Suite 150 Las Vegas, NV 89145	On which entry in Part 1 or Part 2 did Line 4.4 of (Check one):	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	

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Debtor 1 Debtor 2 Peter Gust Scantalides Pamela Ann Scantalides		Case number (if known)
Name and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?
Truist Bank	Line 4.109 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Attn: Bankruptcy Green Sky Program Dept. 3025, Box 2153 Birmingham, AL 35287		■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				 _
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 16,264.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 16,264.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 385,025.11
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 385,025.11

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Fill in this infor	mation to identify your	case:		
Debtor 1	Peter Gust Scant			
	First Name	Middle Name	Last Name	
Debtor 2	Pamela Ann Scar	ntalides		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF NEVADA		
Case number (if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Sunrun Inc. 595 Market Street, 29th Floor San Francisco, CA 94105	Type of Lease Home Improvement
	,	Description: Solar Panels
		Terms: 2039

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	nis information to identify you	ur case:		
Debtor 1				
Debtor 2	First Name Pamela Ann Sc	Middle Name	Last Name	
(Spouse if,		Middle Name	Last Name	
United S	States Bankruptcy Court for the	: DISTRICT OF NEVADA		
Case nu	ımber			
(if known)				☐ Check if this is an amended filing
	al Form 106H edule H: Your Co	dehtors		12/15
Sche	dule n. Your Co	debtors		12/15
people a fill it out, your nan	are filing together, both are ed , and number the entries in the me and case number (if know	qually responsible for supplying the boxes on the left. Attach the	ng correct informat e Additional Page t	is complete and accurate as possible. If two married tion. If more space is needed, copy the Additional Page, to this page. On the top of any Additional Pages, write
1. 0	oo you have any codebiors:	ii you are iiiiig a joint case, do i	lot list either spouse	as a codebior.
■ N □ Y				
		ou lived in a community prope na, Nevada, New Mexico, Puerto		ry? (Community property states and territories include ington, and Wisconsin.)
	No. Go to line 3.			
■ Y	es. Did your spouse, former sp	oouse, or legal equivalent live wi	th you at the time?	
	□ No			
	LI NO			
	■ Yes.			
	■ Yes.			
		ate or territory did you live?	-NONE-	. Fill in the name and current address of that person.
		ate or territory did you live?	-NONE-	. Fill in the name and current address of that person.
		spouse, or legal equivalent	-NONE-	. Fill in the name and current address of that person.
in li For	Name of your spouse, former Number, Street, City, State & Column 1, list all of your code ine 2 again as a codebtor onli	spouse, or legal equivalent Zip Code ebtors. Do not include your sp y if that person is a guarantor	ouse as a codebtor	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official
in li For	Name of your spouse, former Number, Street, City, State & Column 1, list all of your code ine 2 again as a codebtor onlim 106D), Schedule E/F (Offic	spouse, or legal equivalent Zip Code obtors. Do not include your spoy if that person is a guarantor ial Form 106E/F), or Schedule	ouse as a codebtor	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official
in li Fori out	Name of your spouse, former Number, Street, City, State & Column 1, list all of your code ine 2 again as a codebtor onlim 106D), Schedule E/F (Offic Column 2.	spouse, or legal equivalent Zip Code obtors. Do not include your spoy if that person is a guarantor ial Form 106E/F), or Schedule	ouse as a codebtor	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 16G). Use Schedule D, Schedule E/F, or Schedule G to fil **Column 2: The creditor to whom you owe the debt Check all schedules that apply:
in li For	Name of your spouse, former Number, Street, City, State & Column 1, list all of your code ine 2 again as a codebtor onlim 106D), Schedule E/F (Offic Column 2.	spouse, or legal equivalent Zip Code obtors. Do not include your spoy if that person is a guarantor ial Form 106E/F), or Schedule	ouse as a codebtor	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official Deg). Use Schedule D, Schedule E/F, or Schedule G to fil Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line
in li Fori out	Name of your spouse, former Number, Street, City, State & Column 1, list all of your code ine 2 again as a codebtor onl m 106D), Schedule E/F (Offic Column 2. Column 1: Your codebtor Name, Number, Street, City, State and	spouse, or legal equivalent Zip Code obtors. Do not include your spoy if that person is a guarantor ial Form 106E/F), or Schedule	ouse as a codebtor	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 16G). Use Schedule D, Schedule E/F, or Schedule G to fil **Column 2: The creditor to whom you owe the debt Check all schedules that apply:
in li Fori out	Name of your spouse, former Number, Street, City, State & Column 1, list all of your code ine 2 again as a codebtor onl m 106D), Schedule E/F (Offic Column 2. Column 1: Your codebtor Name, Number, Street, City, State and	spouse, or legal equivalent Zip Code obtors. Do not include your spoy if that person is a guarantor ial Form 106E/F), or Schedule	ouse as a codebtor	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official DGG). Use Schedule D, Schedule E/F, or Schedule G to fil Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line
in li Fori out	In which community st Name of your spouse, former Number, Street, City, State & Column 1, list all of your code ine 2 again as a codebtor only m 106D), Schedule E/F (Offic Column 2. Column 1: Your codebtor Name, Number, Street, City, State and Name	spouse, or legal equivalent Zip Code sebtors. Do not include your spous if that person is a guarantor ial Form 106E/F), or Schedule	ouse as a codebto or cosigner. Make G (Official Form 10	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 1966). Use Schedule D, Schedule E/F, or Schedule G to fil Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line
in li Fori out	In which community st Name of your spouse, former Number, Street, City, State & Column 1, list all of your code ine 2 again as a codebtor only m 106D), Schedule E/F (Offic Column 2. Column 1: Your codebtor Name, Number, Street, City, State and Name	spouse, or legal equivalent Zip Code sebtors. Do not include your spous if that person is a guarantor ial Form 106E/F), or Schedule	ouse as a codebto or cosigner. Make G (Official Form 10	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 16G). Use Schedule D, Schedule E/F, or Schedule G to fil Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line
in li Fori out	Name of your spouse, former Number, Street, City, State & Column 1, list all of your code ine 2 again as a codebtor onl m 106D), Schedule E/F (Offic Column 2. Column 1: Your codebtor Name, Number, Street, City, State and Name	spouse, or legal equivalent Zip Code sebtors. Do not include your spous if that person is a guarantor ial Form 106E/F), or Schedule	ouse as a codebto or cosigner. Make G (Official Form 10	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 1966). Use Schedule D, Schedule E/F, or Schedule G to fil Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line
in li Fori out	Name of your spouse, former Number, Street, City, State & Column 1, list all of your code ine 2 again as a codebtor onl m 106D), Schedule E/F (Offic Column 2. Column 1: Your codebtor Name, Number, Street, City, State and Name	spouse, or legal equivalent Zip Code sebtors. Do not include your spous if that person is a guarantor ial Form 106E/F), or Schedule	ouse as a codebto or cosigner. Make G (Official Form 10	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official DGG). Use Schedule D, Schedule E/F, or Schedule G to fil Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

						1			
	in this information to identify your btor 1 Peter Gus	: Scantalides							
	btor 2 Pamela Ar	n Scantalides			_				
	ited States Bankruptcy Court for the	ne: DISTRICT OF NEVAL	DA .						
(If k	se number nown)						ended filing lement showi	ng postpetition following date:	
_	<u>fficial Form 106l</u> chedule I: Your Inc					MM / D	D/ YYYY		
sup spo atta	as complete and accurate as po plying correct information. If yo buse. If you are separated and yo ich a separate sheet to this forn tt 1:	u are married and not filit our spouse is not filing w n. On the top of any additi	ng jointly, and your th you, do not inclu	spouse	is liv mati	ing with you, on about your	include infor spouse. If m	mation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1			Deb	tor 2 or non-f	filing spouse	
	If you have more than one job,	Employment status	☐ Employed				mployed		
	attach a separate page with information about additional employers. Include part-time, seasonal, or	Occupation Employer's name	■ Not employed			■ N	ot employed		
	self-employed work. Occupation may include studen or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Pa	rt 2: Give Details About M	onthly Income							
	imate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to r	report for	any	line, write \$0 ir	the space. In	nclude your no	n-filing
	ou or your non-filing spouse have to space, attach a separate sheet		ombine the information	on for all e	emplo	oyers for that p	erson on the	lines below. If	you need
						For Debtor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, sa deductions). If not paid monthly			2.	\$	0.	00 \$	0.00	
3.	Estimate and list monthly over	rtime pay.		3.	+\$	0.	00 +\$ _	0.00	
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$	0.00	\$	0.00	

Official Form 106I Schedule I: Your Income page 1

Debto Debto		Peter Gust Scantalides Pamela Ann Scantalides			Case	number (<i>if k</i>	nown)	_			
					For	Debtor 1				otor 2 or	
	Сор	y line 4 here	4.		\$		0.00		\$	0.00	
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	۱.	\$		0.00		\$	0.00)
	5b.	Mandatory contributions for retirement plans	5b).	\$		0.00	_	\$	0.00	_
	5c.	Voluntary contributions for retirement plans	5c	; .	\$_		0.00	_	\$	0.00	_
	5d.	Required repayments of retirement fund loans	5d	l.	\$		0.00		\$	0.00	
	5e.	Insurance	5e		\$_		0.00	_	\$	0.00	_
	5f.	Domestic support obligations	5f.		\$_		0.00	_	\$	0.00	_
	5g.	Union dues	5g		\$_		0.00	_	\$	0.00	_
	5h.	Other deductions. Specify:	5n	1.+	\$_		0.00	- +	\$	0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	-	0.00	_	\$	0.00	<u> </u>
7.	Calc	sulate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$		0.00	_	\$	0.00	<u>_</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	8a	۱.	\$		0.00		\$	0.00)
	8b.	Interest and dividends	8b).	\$_		0.00	_	\$	0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce			_			_			_
	0.1	settlement, and property settlement.	8c		\$_		0.00	_	\$	0.00	_
	8d. 8e.	Unemployment compensation Social Security	8d 8e		\$_ \$	2,32	0.00		\$	0.00 2,439.70	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:			\$_ \$_		0.00		\$ \$	0.00	_
	8g.	Pension or retirement income	8g		\$		8.66		\$	568.38	<u> </u>
	8h.	Other monthly income. Specify: Honeywell Retirement Benefit	8h	1.+	\$_		2.16	_	\$	0.00	_
		Mass Commonwealth Pension			\$_	3,46	8.98	-	\$	0.00	<u></u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	6,78	7.50		\$	3,008.0	8
10.	Calc	culate monthly income. Add line 7 + line 9.	10.	\$		6,787.50]+[\$		3,008.	08 = \$	9,795.58
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		-			1 1	_	0,000.	-	0,100.00
	Incluothe	e all other regular contributions to the expenses that you list in Schedul ide contributions from an unmarried partner, members of your household, you refriends or relatives. Into include any amounts already included in lines 2-10 or amounts that are no cify:	ur depe		,			,	l in <i>Sche</i>	edule J. 11. +\$	0.00
		the amount in the last column of line 10 to the amount in line 11. The repetite that amount on the Summary of Schedules and Statistical Summary of Certains							f it	12. \$	9,795.58 ned ly income
13.	Do y ■	you expect an increase or decrease within the year after you file this form No.	m?							month	iy ilicollie
		Yes. Explain:									

						1		
Fill in	this informa	ation to identify y	our case:					
Debto	r 1	Peter Gust S	Scantalid	es		Che	eck if this is:	
Debto	r 2	Pamela Ann	Coontoli	400			An amended filing	wing postpetition chapter
	se, if filing)	Pameia Ann	Scantan	ues			13 expenses as of	
United	l States Bankı	ruptcy Court for the	e: DISTRI	CT OF NEVADA			MM / DD / YYYY	
Cooo	number							
(If kno								
Off	icial Fo	orm 106J				1		
			Evnor	1606				40/4/
		J: Your		ISES . If two married people ar	e filing together be	oth are en	ually responsible fo	12/1
infori	mation. If m		eeded, atta	ch another sheet to this				
Part 1	: Desci	ribe Your House	ehold					
	ls this a joir	nt case?						
-	☐ No. Go to							
l	Yes. Doe	es Debtor 2 live	in a separ	ate household?				
	■ N	lo						
	ΠY	es. Debtor 2 mu	st file Offici	al Form 106J-2, <i>Expen</i> ses	for Separate House	ehold of De	btor 2.	
2. I	Do you hav	e dependents?	■ No					
ı	Do not list D	•	☐ Yes.	Fill out this information for	Dependent's relati		Dependent's	Does dependent
I	Debtor 2.			each dependent	Debtor 1 or Debto	r 2	age	live with you?
	Do not state dependents							□ No
,	uepenuents	names.						☐ Yes ☐ No
								☐ Yes
								□No
								☐ Yes
								□ No
3. I	Do vour ovi	oenses include	_					☐ Yes
-		f people other t	than 🗖	No				
3	yourself an	d your depende	ents? ⊔	Yes				
Part 2	Estim	ate Your Ongo	ing Month	y Expenses				
expe				uptcy filing date unless y y is filed. If this is a supp				
Inclu	de expense	s paid for with	non-cash	government assistance i	f vou know			
the v	alue of suc	h assistance an		luded it on Schedule I: Y			Vour ovn	oncoc
(Offic	ial Form 10	061.)					Your exp	elises
		or home owners		ses for your residence. In	nclude first mortgage	e 4.	\$	1,855.00
ı	If not includ	ded in line 4:						
4	4a. Real e	estate taxes				4a.	\$	0.00
		erty, homeowner'	's, or renter	's insurance		4b.	·	0.00
4	•	•		ıpkeep expenses		4c.	\$	400.00
		owner's associa				4d.	·	100.00
5.	Additional i	mortgage paym	ents for yo	our residence, such as ho	me equity loans	5.	\$	0.00

Utilities: 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services	6a.		
6a. Electricity, heat, natural gas6b. Water, sewer, garbage collection			
6b. Water, sewer, garbage collection		\$	250.00
	6b.		172.00
	6c.	·	578.00
6d. Other Specify: Solar	6d.	· —	100.00
Food and housekeeping supplies	— _{7.}	·	1,500.00
Childcare and children's education costs	8.		0.00
Clothing, laundry, and dry cleaning	9.		200.00
Personal care products and services	10.		500.00
Medical and dental expenses	11.	\$	300.00
Transportation. Include gas, maintenance, bus or train fare.			
Do not include car payments.	12.	· .	350.00
Entertainment, clubs, recreation, newspapers, magazines, and books	13.		250.00
Charitable contributions and religious donations	14.	\$	200.00
Insurance.			
Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance	150	œ	70.00
15b. Health insurance	15a.		70.00
15b. Health insurance 15c. Vehicle insurance	15b. 15c.	·	0.00 120.00
	15d.	·	120.00
15d. Other insurance. Specify: Medical insurance deducted from Mrs.' SS	13u.	·	
Medical insurance deducted from Mr.'s SS		\$ \$	174.70
Dog Insurance		\$ ———	87.00
Health insuance out of pension Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		Ф	150.00
Specify: Back Taxes Installment or lease payments:	16.	\$	350.00
17a. Car payments for Vehicle 1	17a.	\$	560.00
17b. Car payments for Vehicle 2	17b.	·	0.00
17c. Other. Specify: Water heater	17c.	·	170.00
17d. Other. Specify:	17d. 17d.		0.00
Your payments of alimony, maintenance, and support that you did not report as			0.00
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
Other payments you make to support others who do not live with you.		\$	0.00
Specify:	19.		
Other real property expenses not included in lines 4 or 5 of this form or on Sche			
20a. Mortgages on other property	20a.	·	0.00
20b. Real estate taxes	20b.		0.00
20c. Property, homeowner's, or renter's insurance	20c.		0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. Homeowner's association or condominium dues	20e.	\$	0.00
Other: Specify: Gifts and contingencies	21.	+\$	75.00
Pet Care		+\$	1,100.00
Calculate your monthly expenses			
22a. Add lines 4 through 21.		¢	0.796.40
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$ \$	9,786.40
		·	
22c. Add line 22a and 22b. The result is your monthly expenses.		\$	9,786.40
Calculate your monthly net income.			
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	9,795.58
23b. Copy your monthly expenses from line 22c above.	23b.	-\$	9,786.40
• • •		·	-,
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	9.18
Do you expect an increase or decrease in your expenses within the year after yo For example, do you expect to finish paying for your car loan within the year or do you expect your modification to the terms of your mortgage? ■ No. □ Yes. Explain here:			ease or decrease because of

					İ		
Fill in this infor	mation to identify your	case:					
Debtor 1	Peter Gust Scant	Peter Gust Scantalides					
	First Name	Middle Name	Las	t Name			
Debtor 2	Pamela Ann Scar						
(Spouse if, filing)	First Name	Middle Name	Las	t Name			
United States Ba	ankruptcy Court for the:	DISTRICT OF NEVADA					
Case number							
(if known)					☐ Check if this is an		
					amended filing		
You must file thi	s form whenever you f	n connection with a bankrupto	mende	ed schedules. Making a false stat	ement, concealing property, or 00, or imprisonment for up to 20		
Sign	n Below						
	y or agree to pay some	eone who is NOT an attorney t	o help	you fill out bankruptcy forms?			
■ No							
☐ Yes. N	Name of person				Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)		
	ilty of perjury, I declare e true and correct.	that I have read the summary	and s	chedules filed with this declarati	on and		
X /s/ Patr	er Gust Scantalides		х	/s/ Pamela Ann Scantalides			
	Gust Scantalides			Pamela Ann Scantalides			
	re of Debtor 1			Signature of Debtor 2			
Date ,	April 18, 2024			Date April 18, 2024			

Filli	in this inforr	nation to identify you	r case:			
Deb	tor 1	Peter Gust Scar	talides			
	tor 2	First Name Pamela Ann Sca		Last Name		
(Spou	use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ba	nkruptcy Court for the:	DISTRICT OF NEVADA			
Cas (if kno	e number _				-	Check if this is an mended filing
Sta Be as	s complete a	of Financial and accurate as poss nore space is needed,	attach a separate sheet to	are filing together, both are	Bankruptcy equally responsible for sup y additional pages, write you	
		n). Answer every que		Lived Before		
			arital Status and Where You	Lived Before		
1.	wilat is you	r current marital statu	1 5 t			
	■ Married□ Not ma					
2.	During the I	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	_	st all of the places you	ived in the last 3 years. Do no	ot include where you live no	N.	
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there
					nity property state or territory	
	□ No					
	Yes. Ma	ake sure you fill out <i>Sc</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	Expla	in the Sources of You	r Income			
	Fill in the total	al amount of income yo	nployment or from operating u received from all jobs and a have income that you received.	all businesses, including par		ndar years?
	☐ Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

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Debtor :			Scantalides	s	Cas	e number (if known)	
Incl and	Did you receive any other income during this year or the two prev Include income regardless of whether that income is taxable. Example and other public benefit payments; pensions; rental income; interest; d winnings. If you are filing a joint case and you have income that you re			amples of <i>other income</i> are a rest; dividends; money collect	llimony; child support; S ted from lawsuits; royalt	ties; and gambling and lottery	
List	t each s	source and t	he gross inco	ome from each source separa	tely. Do not include income t	hat you listed in line 4.	
	No						
		Fill in the de	etails.				
				Debtor 1		Debtor 2	
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
		/ 1 of currer iled for ban	nt year until ikruptcy:	Social Security Benefits	\$6,983.10	Social Security Benefits	\$7,319.10
				Pensions and Annuities	\$4,584.50	Pension	\$1,705.14
		dar year: December	31, 2023)	Social Security Benefits	\$27,176.40	Social Security Benefits	\$28,484.40
				Pensions and Annuity	\$50,214.00	Pension	\$6,820.56
		dar year bet December		Social Security Benefits	\$51,002.00		
				Pension	\$64,392.00		
				Taxable Interest	\$133.00		
Part 3:	List	: Certain Pa	yments You	Made Before You Filed for	Bankruptcy		
6. Are	e eithei No.	Neither De	ebtor 1 nor E	's debts primarily consume Debtor 2 has primarily consu personal, family, or househo	umer debts. Consumer debt	s are defined in 11 U.S.0	C. § 101(8) as "incurred by an
		During the	90 days befo	ore you filed for bankruptcy, di	id you pay any creditor a tota	I of \$7,575* or more?	
		□ Yes	paid that cr	each creditor to whom you pai editor. Do not include paymer payments to an attorney for the	nts for domestic support oblig		
		* Subject		t on 4/01/25 and every 3 year		or after the date of adju	istment.
-	Yes.			or both have primarily consumer you filed for bankruptcy, di		l of \$600 or more?	
		□ No.	Go to line 7				
		■ Yes	include pay	each creditor to whom you pai ments for domestic support o this bankruptcy case.			aid that creditor. Do not do not include payments to an
Cr	editor'	s Name and	d Address	Dates of payme		-	s this payment for
Cr	editor'	s Name and	d Address	Dates of payme	ent Total amount paid	still owe	s this payment for

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btor 2 Pamela Ann Scantalides		Ca:	se number (if known)	
Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Caliber Home Loans, In P.O. Box 680856 Dallas, TX 75265	Monthly. Three payments of \$1,855.00 each.	\$5,565.00	\$283,606.00	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
American Honda Finance Attn: Bankruptcy Po Box 168088 Irving, TX 75016	Monthly. Three payments of \$560.00 each.	\$1,680.00	\$25,768.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
Within 1 year before you filed for bankru Insiders include your relatives; any genera of which you are an officer, director, person a business you operate as a sole proprieto alimony.	Il partners; relatives of any gen n in control, or owner of 20%	eneral partners; partn or more of their votin	erships of which you	ou are a general partner; corpora ny managing agent, including on
Yes. List all payments to an insider.				
Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Within 1 year before you filed for bankrinsider? Include payments on debts guaranteed or No Yes. List all payments to an insider		yments or transfer	any property on a	ccount of a debt that benefited
Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
rt 4: Identify Legal Actions, Repossess	sions and Foreclosures			
Within 1 year before you filed for bankru List all such matters, including personal inj modifications, and contract disputes. No Yes. Fill in the details.	uptcy, were you a party in a			
Case title Case number	Nature of the case	Court or agency	1	Status of the case
American Express National vs. Peter G. Scantalides 23CH003181	Credit Card Debt	Justice Court Township 243 S. Water S Henderson, N	Street	■ Pending□ On appeal□ Concluded

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Debtor 1 Debtor 2			Case number (i	f known)	
	se title	Nature of the case	Court or agency	Status of th	ne case
An	se number nerican Express National Bank Pamela Scantalides	Credit Card	Justice Court - Henderso Township	on ■ Pending □ On appe	
24	CH000119		243 S. Water Street Henderson, NV 89015	☐ Conclud	
	hin 1 year before you filed for bank eck all that apply and fill in the details		operty repossessed, foreclosed,	garnished, attached	d, seized, or levied?
■□	No. Go to line 11. Yes. Fill in the information below.				
_	editor Name and Address	Describe the Propert	tv.	Date	Value of the
J.,					property
		Explain what happen	ned		
	hin 90 days before you filed for bar ounts or refuse to make a payment			titution, set off any a	amounts from your
_	No				
	Yes. Fill in the details.	5		5	
Cre	editor Name and Address	Describe the action t	the creditor took	Date action was taken	Amount
	hin 1 year before you filed for bank irt-appointed receiver, a custodian, No Yes		. , .	Ü	ŕ
Part 5:	List Certain Gifts and Contribution	ons			
o Wit	hin 2 years before you filed for ban	kruptov, did voji givo anv g	ifts with a total value of more th	an \$600 per person	2
S. WILL	No	kiupicy, did you give ally g	ints with a total value of more th	an accorper person	·
	Yes. Fill in the details for each gift.				
	its with a total value of more than \$ r person	Describe the gif	ts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
4. Witl	hin 2 years before you filed for ban	kruptcy, did you give any g	ifts or contributions with a total	value of more than	\$600 to any charity?
	No				
	Yes. Fill in the details for each gift o	r contribution.			
mo Ch	its or contributions to charities that ore than \$600 arity's Name dress (Number, Street, City, State and ZIP C	Í	ou contributed	Dates you contributed	Value
Part 6:	List Certain Losses				
5. Wit l	hin 1 year before you filed for bank gambling?	ruptcy or since you filed for	r bankruptcy, did you lose anyth	ning because of the	t, fire, other disaster
_	NI.				
	No Yes. Fill in the details.				
D-		Describe any incurence	coverage for the less	Date of your	Value of property
	scribe the property you lost and w the loss occurred		surance has paid. List pending 3 of Schedule A/B: Property.	Date of your loss	Value of property lost

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Debto Debto	Peter Gust Scantalides Pamela Ann Scantalides		Case number (if known)					
Part 7	List Certain Payments or Transfers							
CC	ithin 1 year before you filed for bankruptcy, onsulted about seeking bankruptcy or preparticude any attorneys, bankruptcy petition preparticude any attorneys.	aring a bankruptcy petition?						
A	Person Who Was Paid Inddress Imail or website address Person Who Made the Payment, if Not You	Description and value of any prop transferred	Date payment or transfer was made	Amount of payment				
6 L	Peters & Associates, LLP 1173 S. Rainbow Blvd. .as Vegas, NV 89118 vww.pandalawfirm.com	Attorney Fees	03/14/2024	\$2,500.00				
0	01 Debtorcc, Inc.	Credit Counseling Certificate	02/12/2024	\$19.95				
		Description and value of any prop transferred	or transfer was					
P	Person Who Was Paid			Amount of payment				
4	Beyond Debt Settlement 370 La Jolla Village Drive, Suite 920 San Diego, CA 92122	Deductions from bank accoun	nt. 3/2023- 12/2023	\$10,000.00				
tra In	transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No							
	Person Who Received Transfer	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made				
P	erson's relationship to you		para in exonange					
be	. 110		elf-settled trust or similar device	e of which you are a				
	Yes. Fill in the details.	Description and value of the corre	orty transformed	Date Transfer was				
N	iailie oi tiust	Description and value of the propo	erty transienieu	made				

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Debtor 1 Debtor 2			Case r	number (if known)	
Part 8:	List of Certain Financial Accounts,	Instruments, Safe Depo	sit Boxes, and Storage L	Jnits	
sold Incli	nin 1 year before you filed for bankrup I, moved, or transferred? ude checking, savings, money marke ses, pension funds, cooperatives, as No	t, or other financial acco	ounts; certificates of dep	•	•
	Yes. Fill in the details.				
	me of Financial Institution and dress (Number, Street, City, State and ZIP e)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
P.C	ibank D. Box 390905 nneapolis, MN 55439	XXXX-2004	☐ Checking ■ Savings □ Money Market □ Brokerage □ Other	03/2024	\$0.00
cash	you now have, or did you have within n, or other valuables? No Yes. Fill in the details. The of Financial Institution dress (Number, Street, City, State and ZIP Code	Who else had a	ccess to it? Descri	deposit box or other depo	Do you still have it?
22. Hav	e you stored property in a storage un	State and ZIP Code)	ur home within 1 year be	efore you filed for bankrup	tcy?
	Yes. Fill in the details.				
	me of Storage Facility dress (Number, Street, City, State and ZIP Code	Who else has o to it? Address (Number State and ZIP Code)		be the contents	Do you still have it?
Part 9:	Identify Property You Hold or Cont	rol for Someone Else			
	you hold or control any property that someone.	someone else owns? In	clude any property you b	oorrowed from, are storing	ן for, or hold in trust
	No Yes. Fill in the details.				
	ner's Name dress (Number, Street, City, State and ZIP Code	Where is the pro (Number, Street, City Code)		be the property	Value
Part 10:	Give Details About Environmental	Information			
For the p	ourpose of Part 10, the following defir	nitions apply:			
■ Env	ironmental law means any federal, st	ate, or local statute or re	gulation concerning pol	lution, contamination, rele	eases of hazardous or

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Del	otor 2 Pamela Ann Scantalides		Case number (if known)							
24.	Has any governmental unit notified you that	you may be liable or potentially liable	under or in violation of an environm	ental law?						
	■ No									
	Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice						
25.	Have you notified any governmental unit of a	ave you notified any governmental unit of any release of hazardous material?								
	■ No □ Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice						
26.	Have you been a party in any judicial or adm	inistrative proceeding under any envi	ronmental law? Include settlements	and orders.						
	■ No □ Yes. Fill in the details.									
	Case Title	Court or agency	Nature of the case	Status of the						
	Case Number	Name Address (Number, Street, City, State and ZIP Code)		case						
Par	t 11: Give Details About Your Business or C	Connections to Any Business								
27.	Within 4 years before you filed for bankrupto	cy, did you own a business or have an	y of the following connections to an	y business?						
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity,	either full-time or part-time							
	☐ A member of a limited liability compa	any (LLC) or limited liability partnersh	ip (LLP)							
	☐ A partner in a partnership									
	☐ An officer, director, or managing exe	ecutive of a corporation								
	☐ An owner of at least 5% of the voting	g or equity securities of a corporation								
	■ No. None of the above applies. Go to Part 12.									
	☐ Yes. Check all that apply above and fill	in the details below for each business	3.							
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security							
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed							
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.									
	No									
	Yes. Fill in the details below.									
	Name	Date Issued								

Address (Number, Street, City, State and ZIP Code)

Debtor 1 Peter Gust Scantalides

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Debtor 1	Peter Gust Scant	talides			
Debtor 2	Pamela Ann Sca	ntalides		Case number	er (if known)
Part 12:	Sign Below				
are true a with a ba	and correct. I underst	and that making a false statem sult in fines up to \$250,000, or	ent		under penalty of perjury that the answers money or property by fraud in connection oth.
/s/ Pete	r Gust Scantalides	/s/	Pa	amela Ann Scantalides	
Peter G	iust Scantalides	Pa	ıme	ela Ann Scantalides	
Signatur	re of Debtor 1	Siç	yna	ature of Debtor 2	
Date _A	April 18, 2024	Da	te	April 18, 2024	
Did you a	attach additional page	s to Your Statement of Financ	ial	Affairs for Individuals Filing for Ban	nkruptcy (Official Form 107)?
■ No					
☐ Yes					
Did you p	pay or agree to pay so	meone who is not an attorney	to	help you fill out bankruptcy forms?	
■ No					
□ Yes N	lame of Person	Attach the Bankruptcy Petition	Pre	enarer's Notice, Declaration, and Signa	ture (Official Form 119)

			_
Fill in this infor	mation to identify your case:		
Debtor 1	Peter Gust Scantalides		
	First Name Middle Name	Last Name	
Debtor 2	Pamela Ann Scantalides	Last Name	
(Spouse if, filing)	First Name Middle Name	Last Name	
United States Ba	ankruptcy Court for the: DISTRICT OF N	NEVADA	
Case number			
(if known)			☐ Check if this is an
			amended filing
Official Fo		viduale Filing Under Chent	40 × 7
Stateme	nt of intention for indi	viduals Filing Under Chapt	ter / 12/15
If you are an in it	inidual filing under chantar 7	fill and this form if.	
	lividual filing under chapter 7, you must re claims secured by your property, or	rill out this form in:	
_	sed personal property and the lease has	not expired	
You must file th	is form with the court within 30 days afte ever is earlier, unless the court extends t	er you file your bankruptcy petition or by the date the time for cause. You must also send copies to t	
	eople are filing together in a joint case, t nd date the form.	ooth are equally responsible for supplying correct	information. Both debtors must
J			
	and accurate as possible. If more space our name and case number (if known).	is needed, attach a separate sheet to this form. O	n the top of any additional pages,
	(,		
Part 1: List Y	our Creditors Who Have Secured Claims	8	
1. For any credit		D: Creditors Who Have Claims Secured by Proper	rty (Official Form 106D), fill in the
Identify the cr	reditor and the property that is collateral	What do you intend to do with the property th	
		secures a debt?	as exempt on Schedule C?
Creditor's	American Honda Finance	☐ Surrender the property.	□ No
name:		Retain the property and redeem it.	=
Description of	2019 Honda Pilot 37,015 miles	Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property		Retain the property and [explain]:	
securing debt	:	Retain and pay current	
		_	
	Caliber Home Loans, In	☐ Surrender the property.	□ No
name:		Retain the property and redeem it.	■ Yes
Description of	2825 Lochbroom Way	Retain the property and enter into a Reaffirmation Agreement.	— 165
property	Henderson, NV 89044 Clark	Retain the property and [explain]:	
securing debt	. County	1 1 7 2 2 1 2 1	

Part 2: List Your Unexpired Personal Property Leases

3/28/2019.

Property was purchased

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

securing debt:

Retain and pay current

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		st Scantalides Ann Scantalides			Case number (if known)	
Des	cribe your unexp	ired personal property lea	ases			Will the lease be assumed?
Les	sor's name:	Sunrun Inc.				□ No
						■ Yes
	cription of leased perty:	Type of Lease Home Improvement				
		Description: Solar Panels				
		Terms: 2039				
Par	3: Sign Below					
		ury, I declare that I have in ct to an unexpired lease.	ndicated my intention about	an	y property of my estate that se	cures a debt and any personal
Χ	/s/ Peter Gust	Scantalides	X _	/s/	Pamela Ann Scantalides	
	Peter Gust Sca Signature of Debt				mela Ann Scantalides nature of Debtor 2	
	Date April 1	18, 2024	Dat	e	April 18, 2024	

B2030 (Form 2030) (12/15)

Filing proofs of claim

Motions for relief from stay

Adversary proceedings of any kind

Motions to avoid liens on real or personal property

United States Bankruptcy Court District of Nevada

In re	Peter Gust Scantalides Pamela Ann Scantalides	Case No.					
	Debtor(s)	Chapter	7				
	DISCLOSURE OF COMPENSATION OF ATT	ORNEY FOR DI	EBTOR(S)				
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the atcompensation paid to me within one year before the filing of the petition in bankrup be rendered on behalf of the debtor(s) in contemplation of or in connection with the	tcy, or agreed to be paid	to me, for services rendered or to				
	For legal services, I have agreed to accept	\$	2,500.00				
	Prior to the filing of this statement I have received	\$	2,500.00				
	Balance Due		0.00				
2. 7	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3. 7	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4.	■ I have not agreed to share the above-disclosed compensation with any other per	son unless they are mem	bers and associates of my law firm.				
I	☐ I have agreed to share the above-disclosed compensation with a person or perso copy of the agreement, together with a list of the names of the people sharing in						
5.	n return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
t	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in Preparation and filing of any petition, schedules, statement of affairs and plan where the Representation of the debtor at the meeting of creditors and confirmation hearing and [Other provisions as needed] Document collection and financial analysis Preparation of Petition & Schedules, attorney review of case preparation of the debtor at the meeting of creditors and confirmation hearing and the provisions as needed.	hich may be required; g, and any adjourned hea					
6. I	By agreement with the debtor(s), the above-disclosed fee does not include the follow Motions to impose stay Motions to continue imposition of stay Motions to reinstate stay Motions to reopen case Motions to abandon property Conversions to other chapters of bankruptcy Reaffirmation agreements Redemption agreements Loan modification negotiations	wing service:					

Stipulations/Motions to buy, sell, or refinance real property, vehicles, or other assets

In re	Peter Gust Scantalides Pamela Ann Scantalides	Case No.	
	Debtor(s)	-	

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

	CERTIFICATION
I certify that the foregoing is a complete sthis bankruptcy proceeding.	statement of any agreement or arrangement for payment to me for representation of the debtor(s) in
April 18, 2024	/s/ Judah Zakalik, Esq.
Date	Judah Zakalik, Esq.
	Signature of Attorney
	Peters & Associates, LLP.
	6173 S. Rainbow Blvd.
	Las Vegas, NV 89118
	(702) 507-6990 Fax: (702) 473-9138
	Name of law firm

United States Bankruptcy Court District of Nevada

Peter Gust Scantalides

Date: April 18, 2024

	VER	IFICATION OF CREDITO	R MATRIX	
he ab	ove-named Debtors hereby verify	that the attached list of creditors is true and	correct to the best of their knowl	edge.

Signature of Debtor

/s/ Pamela Ann Scantalides

Pamela Ann Scantalides
Signature of Debtor

Peter Gust Scantalides Pamela Ann Scantalides 2825 Lochbroom Way Henderson, NV 89044

Judah Zakalik, Esq. Peters & Associates, LLP. 6173 S. Rainbow Blvd. Las Vegas, NV 89118

AES

Acct No xxxxxxxxxxxx0005 Attn: Bankruptcy Po Box 2461 Harrisburg, PA 17105

Aes/keycorp Trust 2000 Acct No xxxxxxxxxxxx0001 Attn: Bankruptcy Po Box 2461 Harrisburg, PA 17105

American Express P.O. Box 105278 Atlanta, GA 30348

American Express Acct No 1009 P.O. Box 96001 Los Angeles, CA 90096

American Express Travel Related Services Acct No xxxxxxxxxxx6963 Attn: Bankruptcy Po Box 981537 El Paso, TX 79998

American Express Travel Related Services Acct No xxxxxxxxxxxx3143 Attn: Bankruptcy Po Box 981537 El Paso, TX 79998

American Express Travel Related Services Acct No xxxxxxxxxxxx0553 Attn: Bankruptcy Po Box 981537 El Paso, TX 79998

American Express Travel Related Services Acct No xxxxxxxxxxx9523 Attn: Bankruptcy Po Box 981537 El Paso, TX 79998 American Honda Finance Acct No xxxxx7149 Attn: Bankruptcy Po Box 168088 Irving, TX 75016

American Honda Finance Acct No xxxxx3547 Attn: Bankruptcy Po Box 168088 Irving, TX 75016

American Honda Finance Acct No xxxxx3464 Attn: Bankruptcy Po Box 168088 Irving, TX 75016

Amex

Acct No xxxxxxxxxxxx1283 Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998

Amex

Acct No xxxxxxxxxxxx5333 Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998

Amex

Acct No xxxxxxxxxxxx9833 Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998

Amex

Acct No xxxxxxxxxxxx1233 Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998

Apple Goldman Sachs Bank USA Acct No 4482 Lockbox 6112 P.O. Box 7247 Philadelphia, PA 19170

BAC

Acct No 4484 P.O. Box 851001 Dallas, TX 75285 BAC Acct No 3848 P.O. Box 851001 Dallas, TX 75285

BAC Acct No 9241 P.O. Box 851001 Dallas, TX 75285

Bank of America Acct No xxxxxxxxxx4484 Attn: Bankruptcy 4909 Savarese Circle Tampa, FL 33634

Bank of America Acct No xxxxxxxxxxx3848 Attn: Bankruptcy 4909 Savarese Circle Tampa, FL 33634

Bank of America Acct No xxxxxxxxxxx9241 Attn: Bankruptcy 4909 Savarese Circle Tampa, FL 33634

Bank of America Acct No xxxxxxxxxx6881 Attn: Bankruptcy 4909 Savarese Circle Tampa, FL 33634

Barclays Bank Delaware Acct No xxxxxxxxxx2077 Attn: Bankruptcy 125 South West St Wilmington, DE 19801

Barclays Bank Delaware Acct No xxxxxxxxxx4178 Attn: Bankruptcy 125 South West St Wilmington, DE 19801

Barclays Bank Delaware Acct No xxxxxxxxxxx0710 Attn: Bankruptcy 125 South West St Wilmington, DE 19801 Barclays Bank Delaware Acct No xxxxxxxxxx0675 Attn: Bankruptcy 125 South West St Wilmington, DE 19801

Barclays Bank of Delaware Acct No xxxxxxxxxx2077 P.O. Box 60517 City of Industry, CA 91716

Caliber Home Loans, In Acct No xxxxxx3869 P.O. Box 680856 Dallas, TX 75265

Capital One Acct No xxxxxxxxxxx6719 Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One
Acct No xxxxxxxxxxx7006
Attn: Bankruptcy
Po Box 30285
Salt Lake City, UT 84130

Capital One
Acct No xxxxxxxxxxx0800
Attn: Bankruptcy
Po Box 30285
Salt Lake City, UT 84130

Capital One
Acct No xxxxxxxxxxx2669
Attn: Bankruptcy
Po Box 30285
Salt Lake City, UT 84130

Capital One Acct No xxxxxxxxxxx6719 P.O. Box 71087 Charlotte, NC 28272

Cash 1
Acct No 1010
P.O. Box 4115
Concord, CA 94524

Cash 1 Acct No 0497 P.O. Box 4115 Concord, CA 94524 Chase
Acct No xxxxxxxxxxx9688
PO Box 15123
Wilmington, DE 19850

Chase Card Services
Acct No xxxxxxxxxxx9688
Attn: Bankruptcy
P.O. 15298
Wilmington, DE 19850

Chase Card Services
Acct No xxxxxxxxxxx7577
Attn: Bankruptcy
P.O. 15298
Wilmington, DE 19850

Chase Card Services
Acct No xxxxxxxxxxx3726
Attn: Bankruptcy
P.O. 15298
Wilmington, DE 19850

Chase Card Services Acct No xxxxxxxx9247 Attn: Bankruptcy P.O. 15298 Wilmington, DE 19850

Citibank Acct No xxxxxxxxxxx8896 Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 St Louis, MO 63179

Citibank Acct No xxxxxxxxxxx4572 Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 St Louis, MO 63179

Citibank
Acct No xxxxxxxxxxxx3105
Citicorp Cr Srvs/Centralized Bankruptcy
Po Box 790040
St Louis, MO 63179

Citibank
Acct No xxxxxxxxxxx2707
Citicorp Cr Srvs/Centralized Bankruptcy
Po Box 790040
St Louis, MO 63179

Citibank/Exxon Mobile
Acct No xxxxxxxxxxxx3134
Citicorp Cr Srvs/Centralized Bankruptcy
Po Box 790040
St Louis, MO 63179

Citibank/Sears
Acct No xxxxxxxx3750
Citicorp Cr Srvs/Centralized Bankruptcy
Po Box 790040
St Louis, MO 63179

Citibank/The Home Depot Acct No xxxxxxxxxxxx5963 Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 St Louis, MO 63179

Citicard
Acct No xxxxxxxxx4348
Citicorp Centralized Bankruptcy
Po Box 790040
St Louis, MO 63179

Citizens Bank\First Mark Sevices Acct No xxxxxx5313 Attn: Bankruptcy 1 Citizens Plaza Riverside, RI 02915

Citizens Bank\First Mark Sevices Acct No xxxxxx2568 Attn: Bankruptcy 1 Citizens Plaza Riverside, RI 02915

Citiznsbnk
Acct No xxxxxx1355
1 Citizens Dr
Riverside, RI 02915

Coastl/prosp Acct No xxxxxxxxxxx7533 Attn: Bankruptcy Dept 221 Main Street, Ste 400 San Francisco, CA 94105

Comenity Bank
Acct No xxxxxxxxxxx4031
Attn: Bankruptcy
Po Box 182125
Columbus, OH 43218

Comenity Bank
Acct No xxxxxxxxxxx5098
Attn: Bankruptcy
Po Box 182125
Columbus, OH 43218

Comenity Bank/Eddie Bauer Acct No xxxxxxxxxxx2449 Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Comenity Bank/Sportsmans Guide Acct No xxxxxxxxxxx4864 Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Comenity Bank/Talbots Acct No xxxxxxxxxxx3537 Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Comenitycapital/bjsclb Acct No xxxxxxxxxxx8782 Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Costco Citi Card
Acct No xxxxxxxxxxx3631
Attn: Bankruptcy
Po Box 6500
Sioux Falls, SD 57117

Crb/sunlight/launch Acct No xx2085 Sunlight Financial Llc Charlotte, NC 28246

Credit One American Express Acct No 5339 P.O. Box 60500 City of Industry, CA 91716

Credit One American Express Acct No 9307 P.O. Box 6005 City of Industry, CA 91716 Credit One Bank
Acct No xxxxxxxxxxxx9843
Attn: Bankruptcy Department
6801 Cimarron Rd
Las Vegas, NV 89113

Credit One Bank
Acct No xxxxxxxxxxx3568
Attn: Bankruptcy Department
6801 Cimarron Rd
Las Vegas, NV 89113

Credit One Bank
Acct No xxxxxxxxxxx1088
Attn: Bankruptcy Department
6801 Cimarron Rd
Las Vegas, NV 89113

Credit One Bank
Acct No xxxxxxxxxxx9307
Attn: Bankruptcy Department
6801 Cimarron Rd
Las Vegas, NV 89113

Credit One Bank
Acct No xxxxxxxxxxx6533
Attn: Bankruptcy Department
6801 Cimarron Rd
Las Vegas, NV 89113

Credit One Bank
Acct No xxxxxxxxxxx5705
Attn: Bankruptcy Department
6801 Cimarron Rd
Las Vegas, NV 89113

Credit One Visa Acct No xxxxxxxxxxxx9307 PO Box 60500 City of Industry, CA 91716

Debt Reduction Services Acct No 7555 6213 N. Cloverdale Rd., #100 Boise, ID 83713

Dell Financial Services Acct No xxxxxxxxxxxxx4072 Attn: Bankruptcy P.O. Box 81577 Austin, TX 78708 Discover Financial Acct No xxxxxxxxxx7557 Attn: Bankruptcy Po Box 3025 New Albany, OH 43054

Discover Financial Acct No xxxxxxxxxxx7595 Attn: Bankruptcy Po Box 3025 New Albany, OH 43054

Elastic Acct No 6395 4030 Smith Road Cincinnati, OH 45209

Empower Finance/finwis Acct No xxxxxx7VN6 9169 W State St #499 Garden City, ID 83714

First National Bank/Legacy Acct No xxxxxxxxxxx8900 Attn: Bankruptcy Po Box 5097 Sioux Falls, SD 57117

First Premier Bank Acct No xxxxxxxxxxx3950 3820 N Louise Ave Sioux Falls, SD 57107

First Premier Bank Acct No xxxxxxxxxxx8792 3820 N Louise Ave Sioux Falls, SD 57107

First Premier Bank Acct No xxxxxxxxxxx3950 P.O. Box 5524 Sioux Falls, SD 57117

First Savings Bank Acct No xxxxxxxxxxx5082 Attn: Bankruptcy P.O. Box 5019 Sioux Falls, SD 57117

Firstmark Services Acct No xxx4163 P.O. Box 82522 Lincoln, NE 68501 Fm/granite Edvance Acct No xxx4163 121 South 13th Street Lincoln, NE 68508

Fnb Omaha
Acct No xxxxxxxxxxx9286
Attn: Bankruptcy
P.O. Box 3128
Omaha, NE 68103

Genesis FS Card Services Acct No xxxxxxxxxxx6727 Attn: Bankruptcy Po Box 4477 Beaverton, OR 97076

Genesis FS Card Services Acct No xxxxxxxxxxx6174 Attn: Bankruptcy Po Box 4477 Beaverton, OR 97076

Goldman Sachs Bank USA Acct No xxxxxxxxxxx6630 Attn: Bankruptcy Po Box 70379 Philadelphia, PA 19176

Granite State Mgmt Res Acct No xxxx8249 4 Barrell Ct Concord, NH 03301

Green Funds Go Acct No 6422 P.O. Box 2009 Kahnawake, Quebec JOL 1BO

Harvard University Emp Acct No xxxxxxxxxxx3109 104 Mount Auburn St Cambridge, MA 02138

IRS
Acct No xxx-xx-2318
Attn: Centralized Insolvency Operations
P.O. Box 7346
Philadelphia, PA 19101

Lvnv Funding/Resurgent Capital Acct No xxxxxxxxxxx3789 Attn: Bankruptcy Po Box 10497 Greenville, SC 29603 Main Financial
Acct No xxxxxxxxxxxx5225
Attn: Bankruptcy
Po Box 3521
Evansville, IN 47731

Marcus by Goldman Sachs Acct No xxxxxxxxx7787 Attn: Bankruptcy Po Box 45400 Salt Lake City, UT 84145

Marcus by Goldman Sachs Acct No xxxxxxxxx0334 Attn: Bankruptcy Po Box 45400 Salt Lake City, UT 84145

MC - HUECU Box 382609 Cambridge, MA 02238

McCarthy Burgess & Wolf Acct No xxxxxxxxxxx3631 The MB&W Building 26000 Cannon Road Cleveland, OH 44146

Mr Cooper/United Wholesale Mortgage Acct No xxxxx7939 Attn: Bankruptcy Po Box 619098 Dallas, TX 75261

Prosper MC Acct No 1533 P.O. Box 650078 Dallas, TX 75265

Rapid Cash P.O. Box 535 Dublin, OH 43017

Rapid Cash Acct No 1404 P.O. Box 535 Dublin, OH 43017

Rapid Cash Acct No 1405 P.O. Box 535 Dublin, OH 43017 Rapid Cash/Speedy Cash Acct No 7963 7460 W. Cheyenne, #110 Las Vegas, NV 89129

Rapid Cash/Speedy Cash Acct No 0938 7460 W. Cheyenne, #110 Las Vegas, NV 89129

Sherry A. Moore, Esq. Acct No xxxxxxxxxxx9833 Zwicker & Associates, PC 851 S. Rampart Blvd., Suite 150 Las Vegas, NV 89145

Sherry A. Moore, Esq. Zwicker & Associates, PC 851 S. Rampart Blvd., Suite 150 Las Vegas, NV 89145

Sofia Tixta Thomas Acct No 0991 P.O. Box 981075 Boston, MA 02298

Spotloan Acct No 7763 P.O. Box 927 Palatine, IL 60078

Spotloan Acct No 5288 P.O. Box 927 Palatine, IL 60078

Sunrun Inc. 595 Market Street, 29th Floor San Francisco, CA 94105

Syncb/Care Credit Acct No xxxxxxxx7519 Attn: Bankruptcy Po Box 965061 Orlando, FL 32896

Syncb/Lord & Taylor Acct No xxxxxx6115 Attn: Bankruptcy Po Box 965060 Orlando, FL 32896 SYNCB/Texaco Acct No xxxxxx4377 Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank Acct No xxxxxxxxxxx9562 Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank Acct No 1404 P.O. Box 71711 Philadelphia, PA 19176

Synchrony Bank/Amazon Acct No xxxxxxxxxxx1404 Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Care Credit Acct No xxxxxxxxxxx9296 Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Lowes Acct No xxxxxxx2214 Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Truist Bank
Acct No xxxxxxxxxxx2416
Attn: Bankruptcy
Green Sky Program
Dept. 3025, Box 2153
Birmingham, AL 35287

Truist Financial Acct No xxxxxxxxxxx2416 Attn: Bankruptcy 214 N Tryon St Charlotte, VA 28202

Upgrade, Inc. Acct No xxxxx1851 Attn: Bankruptcy 275 Battery Street 23rd Floor San Francisco, CA 94111 Upgrade, Inc. Acct No 1590 P.O. Box 52210 Phoenix, AZ 85072

US Bank/RMS Acct No xxxxxxxxxxx4110 Attn: Bankruptcy Po Box 5229 Cincinnati, OH 45201

Wakefield Cooperative Acct No xxxx2160

WebBank/ Cleo Acct No xxxxxxxx4979 Attn: Bankruptcy 594 Broadway, Suite 701 New York, NY 10012

Wells Fargo Bank Acct No xxxxxxxxxxxx3572 Attn: Bankruptcy 1 Home Campus, 3rd Floor Mac X2303-01a Des Moines, IA 50328